FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(9)

HEAT PRODUCTS, INC.

FILED Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- 3 1806/1801 711 70011 F8010 10111 70014 1001 01	BII BIBII DIB		
ROUTE 13. BO	ROUTE 13. BOX 256	256							
LAKE CITY FL		LAKE CITY FL 32055			DO NOT INDITE IN THIS SPACE				
U\$		US	US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						10/29/1985			
2. Principal Pl	2a. Mailing Address	<u> </u>			4. FEI Number		TĀ	pplied For	
	ace of Business	26	 -			36-2844963			lot Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.			r		,	Additional
22	.,,	}¬	27			5. Certificate of Status Desired L] '	Fee R	Required
City & State	9	City & State	A PAPER			6. Election Campaign Financing		\$5.00) May Be
23		28	28			Trust Fund Contribution		Added	I to Fees
Zip	Country	Zip	Cou	ntry		8, This corporation owes or has paid	the cu <u>rre</u> n		
24	25	29	30			Personal Property Tax due June 30			∐ No
	g. Name and Address of Currer	nt Registered Agent		B1		10. Name and Address of New Regis	tered Ag	<u>ent</u>	
MCSTAME LOCILLE CAT INNINE					Name				
113 FAIRWAY DR				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		-	
ROUTE 13 BOX 256									
LAH	KE CITY FL 32055			63					
				84	City			85 Zip	Code
				LI			<u>FL</u>	Ц.	7
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed hame of registered agent and tills if applicable. (NOTE: Registered					nt signature require	a months with g	DATE		
12.			13.			ADDITIONS/CHANGES TO OFFICE		_	
TITLE	PD	☐ DELETE	1.1 TO				L	J Change	☐ Addition
NAME	MC SHANE, FRANK R.		1.2 NAME						
STREET ADDRESS	ROUTE 13 BOX 258		1		ADDRESS				1
CITY-ST-ZIP	LAKE CITY FL	DELETE		TY - \$1	r-zip			Change	Addition
TITLE	STD SHANE BATRICK I	☐ DELETE	2.1 TI				_	1 Change	
NAME	ROUTE 13 BOX 256			2.2 NAME		*			}
STREET ADDRESS	LAKE CITY FL	r AITV EI			ADDRESS				
CITY-ST-ZIP	VP	DELETE	2. 4 CITY: 3.1 TITLE		T-ZIP			Change	Addition
TITLE	MONIMUM HIGHLE A					<u></u>	' Augusto		
NAME	BOLIEF 45 BOY SEA			3.2 NAME 3.3 STREET ADDRESS					
STREET ADDRESS	LAKE CITY FL								
CITY-ST-ZIP	PAUL OILLE	DELETE		HY-S	I-ZIP		Т	Change	Addition
TITLE		[bereit	4.1 TITLE 4.2 NAME						
NAME					AODRESS				
STREET ADDRESS			4.3 STREES		1]
CITY-\$T-ZIP TITLE		DELETE	5 1 TITLE		1 - 211			Change	Addition
NAME		hand of the p	52 NAME				_	-	
STREET ADDRESS			5.3 STREE		ADDRESS				
			5.4 CITY-		1				
CITY-ST-ZIP		DELETE	5.4 CRY-3 6.1 TITLE					Change	Addition
NAME	as .		6.2 N				_	-	
					ADDRESS				
STREET ADDRESS				ITY-S'					
CITY-ST-ZIP	portify that the information supplied y	with this filling does not qualify for				Section 119.07(3)(i), Florida Statutes, I fue	ther certif	v that th	e information

increase certify that the information supplied with this ming does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.