FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FILED
95 APR 17 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000001241 (8)

1. Corporate Name
A. L. W. CRAFT, INC.

Principal Place of Business
101 AVIATION DRIVE
WINTER HAVEN FL 33881

Mailing Address
101 AVIATION DRIVE
WINTER HAVEN FL 33881

FOR OFFICE USE ONLY THIS SPACE

3. Date Incorporated (or Qualified): 10/28/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. #
22
City
23
State
24
Country
25

2a. Mailing Address
26
Suite, Apt. #
27
City & State
28
State
29
Country
30

4. FEI Number: 59-3150889
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has taxable or intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
BALATA, JOSE F
101 AVIATION DR.
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and/or 1608 Florida Statutes, the above named corporation submits the 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 hereby accept the obligations of Section 607.0501 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	BALATA, JOSE F
STREET ADDRESS	101 AVIATION DR.
CITY, ST, ZIP	WINTER HAVEN FL 33881
TITLE	M
NAME	BALATA, MICHAEL J
STREET ADDRESS	~~101 AVIATION DR.~~ 606 LAKE DEXTER CIRCLE
CITY, ST, ZIP	WINTER HAVEN FL ~~33881~~ 33884

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 1)
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report, voluntarily furnished and does not qualify for the exemption stated in Section 119.07, 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 a director or officer of the corporation or the person authorized by resolution of its board of directors to execute this report as required by Chapter 607, Florida Statutes; and that my name appears on Block 12 or Block 13 of this report or is attached with an addition.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 95 (813)293-6044

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