

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

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Apr 10 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000014834 (5)

1. Corporation Name:
LATON MACHINE, INC.



Principal Place of Business: 946 DERBY AVENUE, AUBURNDALE FL 33823
Mailing Address: 946 DERBY AVENUE, AUBURNDALE FL 33823

3. Date Incorporated or Qualified: 12/21/1992
3a. Date of Last Report: 05/29/1996
4. FEI Number: 59-3164891
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 liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country
2b. Mailing Address: 26 Suite, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

9. Name and Address of Current Registered Agent
BURTON, DAVID W
946 DERBY AVENUE
AUBURNDALE FL 33823

10. Name and Address of New Registered Agent
81 Name: BILLY E. MINCEY
82 Street Address (P.O. Box Number is Not Acceptable): 946 DERBY AVENUE
83
84 City: AUBURNDALE FL 85 Zip Code: 33823

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: *Billy E. Mincey* (typed name) *Billy E. Mincey* (typed name) President DATE: 3-17-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: BURTON, DAVID W		1.2 NAME:
STREET ADDRESS: 946 DERBY AVENUE		1.3 STREET ADDRESS:
CITY - ST - ZIP: AUBURNDALE FL 33823		1.4 CITY - ST - ZIP:
TITLE: D	<input checked="" type="checkbox"/> DELETE	2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: LANE, DALLAS		2.2 NAME:
STREET ADDRESS: 946 DERBY AVENUE		2.3 STREET ADDRESS:
CITY - ST - ZIP: AUBURNDALE FL 33823		2.4 CITY - ST - ZIP:
TITLE: D	<input type="checkbox"/> DELETE	3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: MINCEY, BILLY		3.2 NAME:
STREET ADDRESS: 946 DERBY AVENUE		3.3 STREET ADDRESS:
CITY - ST - ZIP: AUBURNDALE FL 33823		3.4 CITY - ST - ZIP:
TITLE:	<input type="checkbox"/> DELETE	4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:
STREET ADDRESS:		4.3 STREET ADDRESS:
CITY - ST - ZIP:		4.4 CITY - ST - ZIP:
TITLE:	<input type="checkbox"/> DELETE	5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:
STREET ADDRESS:		5.3 STREET ADDRESS:
CITY - ST - ZIP:		5.4 CITY - ST - ZIP:
TITLE:	<input type="checkbox"/> DELETE	6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:
STREET ADDRESS:		6.3 STREET ADDRESS:
CITY - ST - ZIP:		6.4 CITY - ST - ZIP:

14. I do hereby certify that the information supplied with this filing 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.

SIGNATURE: *Billy E. Mincey* (typed name) *Billy E. Mincey* (typed name) DATE: 3/17/97 Daytime Phone #: 941-967-0454

CR2E034 (9/96)