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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 29 1997 8:00am

Secretary of State

DOCUMENT # P92000015097 (8)

AUTOMATION SPECIALTIES ENTERPRISES, INC.

14. I do hereby certify that the information supplied with this filling do information indicated on this annual report or supplemental and I am an officer or director of the corporation or the receiver of the appears in Block 12 or Block 15 if changed, of on an attaction or the corporation of the

Principal Place of Business Mailing Address							IEIGI IIDDI EIIH EEI	IE (Eill IBŠI IBBI
1836 14TH ST W. 1836 14TH ST W. BRADENTON FL 34205 BRADENTON FL 34205-7135 US US			95					
						 Date Incorporated or Qualified 12/28/1992 	3a. Date of L 03/01/19	
2. Principal P	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number 65-0382376	-	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					X \$8	75 Additional
22		27				5. Certificate of Status Desired	A F	ee Required
City & Stat	e	h1 ·	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees
Zip	Country Zip Co			ſу		8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30			Florida Statutes	Yes 🗌 No	
9, Name and Address of Current Registered Agent					ame	10. Name and Address of New Reg	istered Agent	
	ez, timothy r. ' Gulf dr		81					
	MES BEACH FL 34217		82		reel Addres	ss (P.O. Box Number is Not Acceptable	D)	
			83	3	······································			
Į			84	4 Ci	ity		—. 85	Zip Code
40				<u> </u>			<u> </u>	To a 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12
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 softice 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, or amplification of Section 607.0505, Florida Statutes.								nt as registered nt as registered
1	m tamiliar with, and accept the oblig	ations of Section 607.0505, FR	orida Statute	3S.				
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	E. Rog-stered Ag	gent sig	gnature required	whon reinstating)	DATE	
12.	OFFICERS AN	ID DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	
TITLE NAME	PEREZ, TIMOTHY R	DELETE	1.1 TITLE 1.2 NAME		1		اللا ليسا	suide [1] Milamon
STREET ADORESS	4307 GULF DR.		1.3 STREE		RESS			
CITY-ST-ZIP	HOLMES BCH FL		1.4 CITY -					
TITLE	VP ☐ DELETE 2.1						Ch	ange Addition
NAME	FERGUSON, DALE			2.2 NAME				
STREET ADDRESS	4716 WEBBER ST SARASOTA FL 34232		2.3 STREFT ADDRESS 2.4 City-St-Zip		}			
CITY-ST-ZIP TITLE	ST ST	DELETE	3.1 HTLE			•	Ch	ange Addition
NAME	SCADDING, BARBARA	<i>[</i>]	3.2 NAME		S A	lfonso Villa		
STREET ADDRESS	2724 GOLDRN POINCIANA PL		3.3 STREE	T ADOF		214 W. Crenshaw		
City-ST-ZIP	SARASOTA FL 34232	Drutt	3.4 CITY			ampa, Fla. 33615	Ta/Ch	0000 DV4435
TITLE NAME		☐ DELETE	4.1 TITLE 4.2 NAMI		Т		LIE Un	ange _e r Addrion
STREET ADDRESS			4.2 NAW	-	ncen l	onathan Davis		
CITY-ST-ZIP	_		4.4 CITY-		B	3111 Woodlawn Cir		
TITLE		☐ DELETE	5 1 YITLE		1	almetto,Fla.3422	Ch	ange 🔲 Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE		·			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- 6.1 TITLE				Ch	ange Addition
NAME		La Diec it	6.2 NAME					
STREET ADDRESS			6.3 STREE		RESS	•		
i i					1			

or true and accurate and that my signature shall have the same logal effect as if made under oath, that eproported to execute this report as required by Chapter 607, Florida Statutes; and that my name

911 7119-1271