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 # 1. Corporation Name P9300000206 (1)

GARCO INDUSTRIES, INC.

FILED Apr 20 1998 8:00am Secretary of State



Principal Place	Mailing Ai	Mailing Address							
1015 STATE RD 436 CASSELBERRY FL 32707			1015 STATE RD 436 CASSELBERRY FL 32707				DO NOT WIDITE IN THIS COACE		
							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
							01/01/1993		
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number Applied For		
21		26					59-3155148 Not Applicat		
Suite, Apt. #, etc.		Suite, .	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	9	City &	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution		
Zip	Country	Zip		Cour	itry		8. This corporation owes or has paid the current year Intangible		
24	25	29		30	30		Personal Properly Tax due June 30. Yes No		
	9. Name and Address of Curr		gent	11			10. Name and Address of New Registered Agent		
GA	ROJA, FERNANDO		·····	1	81	Name			
	15 STATE RD 436			Į.					
CASSELBERRY FL 32707				11	82	Street Add	dress (P.O. Box Number is Not Acceptable)		
OA:	OOÇEDENNI FE 32/V/			h.	83		*		
				[
				1	84	City	85 Zip Code		
							FL 30 25 code		
11. Pursuant t	o the provisions of Sections 607.0 noistered agent, or both, in the Sta	502 and 607.1508 te of Florida. Suct	s, Florida Statui h channe was	tes, the ab- authorized	ove-	named corp the corporal	rporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered		
agent. I ar	n familiar with, and accept the obl	igations of, Sectio	n 607.0505, Fl	orida Statu	ites.	F 	ation's board of directors. I hereby accept the appointment as registered		
SIGNATURE									
	Signature, typed or printed name of registered i	<u> </u>	de (NOT		Agent	signature requi	uired when reinstating) DATE		
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD		☐ DELET E	1.1 TITL	.E		☐ Change ☐ Additi		
NAME	GARCIA, FERNANDO			1.2 NAN	NE				
STREET ADDRESS	297 LESLIE LANE			1.3 STR	EET A	DDRESS			
CITY-ST-ZIP	LAKE MARY FL			1,4 CITY	Y-ST-	ZIP			
TITLE		· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 TITU	.E		Change Additi		
NAME				2.2 NAN	νE				
STREET ADDRESS				2.3 STR	EET AI	DORESS			
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NAME			_	3.2 NAM					
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CITY-ST-ZIP TITLE			DELETE	3.4. CIT 4.1 TITL		- 217	☐ Change ☐ Additi		
							□ orango □ Mosa		
NAME				4. 2 NAI					
STREET ADDRESS						DDRESS			
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NAME				5.2 NAM	ΛE	1			
STREET ADDRESS				5.3 STR	EET AL	DDRESS			
CITY-ST-ZIP				5.4 CITY	Y-ST-	ZIP			
TITLE			DELETE	6.1 TITL	.E		Change Additi		
NAME				6.2 NAM	ΛE				
STREET ADDRESS				6.3 STR	EET AC	ODRESS			
CITY-\$T-ZIP				6.4 CITY		ľ			
VIII-QI-LIF				0.4 011	, 31,	<u> </u>			

I 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. atlachment with an address.