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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000021881 (6)

F.B. INDUSTRIES, INC.

Mailing Address Principal Place of Business 8503 GIBSON OAKS DR. 8503 GIBSON OAKS DR. LAKELAND FL 33809 **LAKELAND FL 33809-1807** 3. Date incorporated or Qualified 3a. Date of Last Report 03/17/1993 07/12/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address NOT APPLICABLE 21 Suite Apt. # etc. Suite, Apt. #, etc. \$8.75 Additional N 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5,00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Country Zip Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes 🛄 No Florida Statutes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLETZ. FRANCES E 8503 GIBSON OAKS DR. 82 Street Address (P.O. Box Number is Not Acceptable) **LAKELAND FL 33809**

FILED Apr 18 1997 8:00am Secretary of State

Applied For

Zip Code

Not Applicable

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 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 name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE BILLE GOLETZ, FREDERICK B 1.2 NAME NAME 8503 GIBSON OAKS DR. 1.3 STREET ADDRESS STREET ADDRESS LAKELAND FL 33809 1.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 2.1 TITLE THILE **GOLETZ, FRANCES E** 22 NAME 8503 GIBSON OAKS DR. 2.3 STREET ADDRESS STREET ADDRESS **LAKELAND FL 33809** 2.4 CITY-ST-ZIP CHY-ST ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY - \$T - ZIP CITY-ST-2IP Addition Change DELETE 4.1 TITLE THLE 4, 2 NAME NAME STREET ADORESS 4.3 STREET ADDRESS 4.4 City - ST - ZiP CITY-ST-20F Addition DELETE 5.1 TITLE Change Change TiTLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP DITY-\$1-ZP Addition Change THE DELETE 6.1 TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CHTY - ST - Zir

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City

14. Lo 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.

HEARDERICK B GOLETZ

3/28/97 (941)858970)