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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 04, 1999 8:00am

**Secretary of State** 

02-04-1999 90006 032 \*\*\*150.00

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT #

1. Corporation Name

	HODUCIS & MATERIALS, II	.10.								
Principal Plac	e of Business	M	ailing Address	-			-	II()  U 0 U    <del>1</del>  1		
2553 OVERLAND ROAD APOPKA FL 32703 US			2553 OVERLAND ROAD APOPKA FL 32703 US				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed 06/15/1993			
2: Principal P	lace of Business	2a.	Mailing Address				4. FEI Number			lied For
1		26					59-3188951	- 40		Applicable
Suite, Apt.	· '		Suite, Apt. #, etc.				5. Certificate of Status Desired			iditional uired
2		27	- 1-25 J. Turaning						•	
City & Stat	e .	28	City & State				6. Election Campaign Financing Trust Fund Contribution	•		fay Be Fees
Zip	Country		Zip	Cou	intry		8. This corporation owes the current year		_	_
24	25	29		30			Personal Property Tax.	☐ Yes	L	_No
	9. Name and Address of Currer	nt Regis	tered Agent		<b>!</b>		10. Name and Address of New Registe	red Agent		•
FEA		. •	**		81	Name	•			
	ntis, James 3 Overland Road				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			,, ,
APO	PKA FL 32703-7727				83					
	•				84	City	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	85	Zip Co	ido i i
office or r	registered agent, or both, in the State	of Florid	fa. Such change was a	authorized	bove-	named come	pration submits this statement for the purpos n's board of directors. I hereby accept the a	FL	g its regi	egistered
· office or r	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable. (NOT)	authorized orida Stati E: Registered	bove- by thutes.	named corpo he corporatio	n's board of directors. I hereby accept the a	e of changing ppointment a	s regi	egistered stered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Florif applicable. (NOTI	authorized orida Stati	bove- by thutes.	named corpo he corporatio	n's board of directors. I hereby accept the a	e of changing ppointment a	ctor	egistered stered
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable. (NOT)	authorized orida Stati E: Registered	bove- i by thutes.	named corpo he corporatio	n's board of directors. I hereby accept the a	e of changing ppointment a	ctor	egistered stered
office or ragent. I a SIGNATURE  12.	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Florif applicable. (NOTI	authorized orida Statu E: Registered	bove- d by th utes.	named corpo he corporatio	n's board of directors. I hereby accept the a	e of changing ppointment a	ctor	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of Fricers At PST MAZUROWSKI, PAUL 129 HOLDERNESS DR	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Florif applicable. (NOTI	E: Registered  13. 1.1 TII	bove- d by th utes.	named corpo he corporatio	n's board of directors. I hereby accept the a	e of changing ppointment a	ctor	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring if applicable. (NOTI	E: Registered 13. 1.1 TH 12 NA 1.3 ST	bove- d by th utes.	named corporation to corporation signature required	n's board of directors. I hereby accept the a	ES AND DIRE	CTOF	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Florif applicable. (NOTI	E: Registered 13. 1.1 TH 12 NA 1.3 ST	bove-id by the utes.  I Agent s  TLE  AME  TREET A	named corporation to corporation signature required	n's board of directors. I hereby accept the a	e of changing ppointment a	CTOF	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of FICERS AND PST MAZUROWSKI, PAUL 129 HOLDERNESS DR LONGWOOD FL	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring if applicable. (NOTI	E: Registered  13. 1.1 TH  12 NA  1.3 ST  1.4 CF	bove-id by the utes.  I Agent s  TLE  AME  TREET A  TY-ST-	named corporation to corporation signature required	n's board of directors. I hereby accept the a	ES AND DIRE	CTOF	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the obl	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring if applicable. (NOTI	E: Registered  13. 1.1 TII 12 NA 1.3 ST 1.4 CT 2.1 TII 2.2 NA	bove- if by the utes.  I Agent s  TLE  TREET A  TTY-ST-  TLE  AME	named corporation to corporation signature required	n's board of directors. I hereby accept the a	ES AND DIRE	CTOF	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable (NOTI CTORS DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CF 2.1 TI 2.2 NA 2.3 ST 2.4 CC	bove- d by the utes.  I Agent s  TLE  AME TREET A  TTLE  AME TREET A  TREET A  TREET A  TREET A  TREET A	named corporation signature required ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring if applicable. (NOTI	E. Registered 13. 1.1 TII 12 NA 1.3 ST 1.4 CF 2.1 TII 22 NA 2.3 ST 2.4 CG 3.1 TII	bove- bove- boy the state of th	named corporation signature required ADDRESS	n's board of directors. I hereby accept the a	ES AND DIRE	CTOR	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable (NOTI CTORS DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CF 2.1 TI 2.2 NA 2.3 ST 2.4 CC	bove- bove- boy the state of th	named corporation signature required ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable (NOTI CTORS DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TM 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA 3.3 ST	bove- boye-	named corporation signature required ADDRESS ZIP ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring CTORS  DELETE  DELETE	E: Registered 13. 1.1 TII 12 NA 1.3 ST 1.4 CT 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CCI 3.4 CCI 3.4 CCI 3.4 CCI 3.5 TII 3.5 CCI 3.6 CCI 3.7 TII 3.7 CCI 4.7 C	bove-if by the state of the sta	named corporation signature required ADDRESS ZIP ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR nge	egistered stered  RS IN 12 Addition Addition
office or ragent. I a signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a , Section 607.0505, Flo if applicable (NOTI CTORS DELETE	E: Registered 13. 1.1 TII 1.2 N 1.3 ST 1.4 CF 2.1 TII 2.2 N 2.3 ST 2.4 CF 3.3 ST 3.4 CF 4.1 TII	bove-if by the future in the f	named corporation signature required ADDRESS ZIP ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR nge	egistered stered
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring CTORS  DELETE  DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CF 3.1 TII 3.2 NA 4.1 TII 4.2 NA 4	bove-if by if utes.  Agent is  Agent is  TLE  AME  ITY-ST- ITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR nge	egistered stered  RS IN 12 Addition Addition
office or ragent. I a signature  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring CTORS  DELETE  DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST	DOVE-11 by the trues.  I Agent s  TLE  AME  TREET A  THE  THE  THE  THE  THE  THE  THE  TH	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOR nge	egistered stered  RS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a seed of the common seed of th	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CT 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 4.3 ST 4.4 CI 4.	DOVE-19 by the state of the sta	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	n's board of directors. I hereby accept the a	F L	CTOF nge	egistered stered stered SIN 12 Addition Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of the state of the obligation of the state of the obligation of the obligati	of Floric ations of ont and title	da. Such change was a section 607.0505, Floring CTORS  DELETE  DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CC 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST	DOVE-19 by the state of the sta	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	n's board of directors. I hereby accept the a	E S AND DIRE	CTOF nge	egistered stered  RS IN 12 Addition Addition

14. 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, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

**SIGNATURE:** 

भाग भाग हैं।

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

Change

☐ Addition