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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000045266 (2)

STAMAK INTERNATIONAL, INC.

FILED Feb 06 1997 8:00am Secretary of State

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Principal Place of	of Business	Mailing Address	3			İ		***************************************	*****			••••	
1782 OTISCO WI WINTER SPRING	S FL 32708	1782 OTISCO W WINTER SPRING	S FL 32708-5522	2									
3500 Alona AVE WE & SAME						3.		Date Incorporated or Qualific		3a. Date of Last Report			
WINTER	PARK, F1 32793	.						06/16/1993	U.	<u>5/14/18</u>			
2. Principal Plac	ce of Business	2a. Mailing Add	ress			4.	4. F	El Number		-	-+''	olied For	
21		26						<u>59-3191392</u>				Applicable	
Suite, Apt. #,	, etc.	Suite, Apt. #	, etc.			5.	5. C	Certificate of Status Desired			. 75 A ee Rei	dditional quired	
Cily & State		City & State				6.	6. E	lection Campaign Financing)	\$5	.00	May Be	
23		28					T	Frust Fund Contribution		A	dded to	Fees	
Ζip	Country	Zip		ountry	,	8.	8. T	This corporation has liability	for intangib	e tax un	der s.	199.032,	
24	25	29	30				F	Florida Statutes	Yes	☐ No			
	9. Name and Address of Current I	Registered Agent				10	0. 1	Name and Address of New	Registered	Agent			
LAVO	HE, JACK M			81	Nai	me							
	OTISCO WAY			82	C+r.	ant Address /	/D C	O. Box Number is Not Accep	table\				
	ER SPRINGS FL 32708			02	501	eet Audiess (i	ţr.c	C. BOX NUMBER IS NOT ACCE	nabie)				
7411411	en orthodicaeth	wo		83									
ي وي	oo kioma two	~~~~											
10.11	oo Aloma Ne nterraek, Fl	32757		84	City	У			F	85	Zip C	Code	
11 Pursuant to	the provisions of Sections 607.0502	and 607 1508. Flori	da Statutes, the	above	e-pan	ned corporation	tion	submits this statement for the			aina its	registered	
officials or rec	pistered agent, or both, in the State of	f Florida. Such chai	nge was author	ized by	y the	corporation's	s bo	oard of directors. I hereby ac	cept the ap	pointme	nt as	registered	
agent. I am	familiar with, and accept the obligati	ons of, Section 607	'.0505, Florida S	statutes	S .								
SIGNATURE			WEST D					-1	DATE				
	Ignature, typed or printed harne of registered agent. OFFICERS AND			3.	ent s-gr	nature required whe		DDITIONS/CHANGES TO O		ID DIRE	CTOB	S IN 12	
12.	n Orricens And			1 TITLE				DUITIONO/OFIANOLO TO O	TIOCHO A	Cr		Addition	
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NAME	LAVOIE, JACK M		4	.2 NAME								1	
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CITY-ST-ZIP	WINTER SPRINGS FL 32708			4 CITY-S	ST-ZIP							Addition	
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NAME		1 . 21	2	.2 NAME		1							
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CITY-ST-ZIP	Wintertack, F1 32792 2			2. 4 CITY - ST - ZIP									
TITLE		, 🗆 🗅	ELETE 3	1 TITLE						∐ Ch	nange	Addition	
NAME			3	2 NAME									
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NAME:			4	. 2 NAME									
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NAM!				i.2 NAME									
STREET ADDRESS			1 6	3.3 STREET	t addr	RESS							
CITY - ST - ZIP				.4 CITY-S									
14. Ldo hereby	v certify that the information supplied	with this filing does	not qualify for	the exe	empti	ion stated in S	Sec	ction 119.07(3)(i), Florida Sta	tutes. I furti	ner certif	v that	the	

4. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), indicastatutes. Fluringer 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 comporation 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 for on an attachment with an address.

SIGNATURE:

TOP Date Dayline Phone #