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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400002849 (5)

BENDROTH LUBRICANTS, INC.

J-2.									
Principal Place of Business Mailing Address						- E DEMANDAN KIRA IBUIK BARKI BAKKI MAKIN MERIK MAKKI B	0H0 47001 10111 0X1	EIR IRIA MAI	
418 HALLANDALE BEACH BLVD 416 HALLANDALE BEAC			I BLVD						
HALLANDALE FL HALLANDALE FL						DO NOT WRITE IN THI	e edace		
						3. Date Incorporated or Qualified	3 ST AUL		
						01/12/1994			
2. Principal Place of Business 2e. Mailing Address			<del></del>			4. FEI Number	I A	pplied For	
21	26					65-0473233	<del> </del>	ot Applicable	
Suite,	Suite, Apt. #, etc. Suite. Apt. #, etc.			<del></del>		5. Certificate of Status Desired	\$8.75	Additional	
22						6. Certificate of Status Dealfed	Fee Ro	equired	
	City & State City & State					6. Election Campaign Financing		May Be	
23	28					Trust Fund Contribution		to Fees	
Zip	Country 25	Zip 29	Cou <b>30</b>	ишу		<ol> <li>This corporation owes or has paid the operational Property Tax due June 30.</li> </ol>		tangible   T No	
24	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
	ROTHENBERG, STEPHEN		~	81	Name				
416 HALLANDALE BEACH BLVD				82	Stroot Addre	occ (D.O. Boy Number is Not Accordable)	_		
HALLANDALE FL				82 Street Address (P.O. Box Number is Not Acceptable)					
			Ī	83					
ļ			- 1	84	City		<b>85</b> Zip	Code	
					,	F			
11. Purs offic ager	JRE SAM / K	) [ has ]-				oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing in ppointment as	ts registered s registered	
	Signature, your or printed harve of registered			d Age	nt signature require	d when reinstating) DATE		)	
12.	D OFFICERS 7	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	DIRECTOR Change	Addition	
NAME		ROTHENBERG, STEPHEN		1,2 NAME			□ oumide	7.00.1.07	
	REET ADDRESS 416 HALLANDALE BEACH BLVD			1.3 STREET ADDRESS				]3	
CITY-ST-ZI	LIALL AND ALE PA		1.4 Cf					13	
TITLE		DELETE	2.1 TITLE				Change	Addition	
				2.2 NAME		i es			
STREET ADD	MESS		2.3 ST	REET	ADDRESS			İ	
CITY-ST-ZI	Р			2.4 CITY - ST - ZIP					
TITLE	DELETE		3.1 TI	3.1 TITLE			Change	☐ Addition	
NAME	J		3.2 NA						
STREET ADD					ADDRESS				
City+S1-Zi	T priete			3.4. CITY-ST-ZIP			Change	Addition	
TITLE	DELETE		1	4.1 TITLE 4.2 NAME			Change	Addition	
NAME Street add	orce				ADDRESS			j	
CITY-ST-ZI									
TITLE	ZIP DELETE		_	4.4 CITY - ST - ZIP 5.1 TITLE			Change	Addition	
NAME			5.2 NA						
STREET ADD	RESS		1		ADDRESS			1	
CITY-ST-ZI	=-		5.4 CI						
TITLE		DELETE	6.1 111				☐ Change	Addition	
ALCA OF			c n		ľ				

14. Thereby certify that the information supplied with this filing does not quality 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or (Prant and Chapter 607).

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

4-7-98 954 457 8288

**FILED** 

Apr 14 1998 8:00am

Secretary of State