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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400023554

1. Corporation Name

C&L DIVERSIFIED INDUSTRIES, INC.

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90217 013 ***150.00



Principal Place	of Business	Mailing Address	Mailing Address					iis aniid iidea iii		JAREN Bere n (Bre e	
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DAYTONA BEAC	ational speedway blvd Ch fl 32124		3622 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32124				,				
					ļ	DO NOT WRITE IN THIS SPACE					
						l	3. Date Incorporated or Qualifed			}	
		- 11 111 111					03/22/1994			 }	
\neg	ace of Business	2a. Mailing Address	ļj				4. FEI Number	-	+ •	olied For	
21		[26]				65-0484366	- ¢0		Applicable dditional		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certifcate of Status Desired	1	ee Red		
City & State		City & State	City & State				e Flactice Compoier Financine				
¬ ˙	-		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23 Zip	Country		Zip Country				8. This corporation owes the current				
24	25	29	30	-			Personal Property Tax.	☐ Ye		□No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
V, Hun					Na	ame					
MAN	n, Clarence		82			root Addron	ss (P.O. Box Number is Not Acceptable)				
3622	W INTERNATIONAL SPEEDWA	y blvd	BLVD			ieel Addres	ss (P.O. Box Number is Not Acceptable	,		Ì	
DAY	rona Beach FL 32124			83							
				84		<u> </u>		85	Zip C	ode	
				04	Cit	ty		FL °°	Zip C	ode	
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 office or 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											
office or n	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change t ations of, Section 607.050	was authorize 5, Florida Sta	ed by Itutes	the d 3.	corporation	's board of directors. I hereby accept the	e appointment	as reg	istered	
SIGNATURE	, ,										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.		ND DIRECTORS	13				ADDITIONS/CHANGES TO OFFICE	ERS AND DIR ☐ CI		RS IN 12 Addition	
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NAME :	MANN, CLARENCE	manual mina		VAME							
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CITY-ST-ZIP	•		1	CITY-S							
OU CONAIL				-	***						

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 any 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 chapted, pr on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99 904-255-6