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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000029590 (4)

DE PAIGE INDUSTRIES INC.

Principal Place	of Business	Mailing Address				i 1881/68) (18 /8/11 BIBLI BBILL BBILL BBILL BBILL BLISA LIGIA (BIBLI BLILLA IBLIK BBILL SAGI		
508 E. NORTH BAY STREET		508 W. NORTH BAY STREET				Į.		
TAMPA FL 33603		TAMPA FL 33603				DO NOT WRITE IN THIS SPACE		
U\$		US			3. Date Incorporated or Qualified			
						04/19/1994		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For	
21		26				59-3237417	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required		
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country Zip C		Count	lry		8. This corporation owes or has paid the ou	rrent year Intangible	
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	g, Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered	Agent	
PAG	BLIOCCA, STEVEN		8	11	Name			
	22 MORNINGHIGH DR		l e	2	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	Z FL 33549							
			6	33				
				14	City		85 Zip Code	
		•	i		•	FLFL	•	
11, Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the abo	ove	-named corp	poration submits this statement for the purpose of	if 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 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: Registe				Ager	it signature require	red when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition	
TITLE	D	☐ DELETE	1,1 1111				Change C Addition	
NAME	PAGLIOCCA, STEVEN		1,2 NAM	_				
STREET ADDRESS	508 W. NORTH BAY STREET		1.3 STRE	EE1 A	ADDRESS			
CITY-ST-ZIP	TAMPA FL		1,4 CITY		- ZIP		Change Addition	
TITLE	D	X DELETE	2.1 TITL				Change L Addition	
NAME	CARLTON, ROSARIE		2.2 NAV					
STREET ADDRESS	15906 EAGLE RIVER WAY				ADDRESS			
CITY-ST-ZIP	TAMPA FL 33624	PELETE	2. 4 CITY - ST - ZIP 3 1 TITLE		[- 7(P		Change Addition	
TITLE	☐ DELETE						C outlings C Montroll	
NAME			3 2 NAV					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CIT		1-211		Change Addition	
TITLE		C) petrit	4.1 IIIL					
NAME			1		ADDRESS			
STREET ADDRESS			1					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITL	_	- 2117		☐ Change ☐ Addition	
NAME			5.2 NAM					
ł i					ADDRESS			
STREET ADDRESS			5.4 CITY		- 1			
CITY-ST-ZIP TITLE		DELETE	5.4 CITS 6.1 TITL		- 411		Change Addition	
NAME			6.2 NAM				· · · ·	
STREET ADDRESS					ADDRESS			
			6.4 C(T)					
14. I hereby c	entity that the information supplied w	ith this filing does not qualify	for the exer	mpt	tion stated in	Section 119.07(3)(i), Florida Statutes. I further o	ertify 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 att	allyment with an address.	ا بالانتهام . م		apon ao roqu	1 1	The second of the second of the	