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

Mailing Address

12350 S BELCHER RD

**PROFIT** CORPORATION · ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000033737

1. Corporation Name

Principal Place of Business

12350 S BELCHER RD

SERVICE CHEMICAL & SUPPLY COMPANY, INC.

BLDG 5D LARGO FL 33773 US		BLDG 5D LARGO FL 33773 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
00		,				05/02/1994				- 1
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	_		Applied For	
21		26				59-3255163			Not Applicabl	le
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired				
City & State	e	City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country 25	Zip 29 30	Count	try		This corporation owes the current year     Personal Property Tax.		gible	□No	
24	9. Name and Address of Current		<u>'</u> T			10, Name and Address of New Register	ed Ag	jent		
				11 N	lame					
NOR	DMAN, RICHARD G			32 S	troot Ad	dress (P.O. Box Number is Not Acceptable)				{
	JAYWOOD RD		<b>62</b> Street			dress (F.O. Box Humber is Not Acceptable)				_]
LARC	GO FL 33777		8	33						
			[8	34 C	ity	<u></u> ,		85 Zig	p Code	
							: <u>L</u>		:	
office or n	to the provisions of Sactions 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	t Fiorida. Such change was auth	ionzea i	ov ine	e corpora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointr	nent as	registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	agistered A	gent sign	nature requi	red when reinstating) DATE				ء ا
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS	AND	DIREC	TORS IN 12	ion
TITLE	PD	☐ DELETE	1.1 TITL	E				Change		ion . 🗧
NAME	NORDMAN, RICHARD G		1.2 NAM	E						5
STREET ADDRESS	7917 JAYWOOD DR		1.3 STR		DRESS					l C
CITY-ST-ZIP	LARGO FL 33777		1.4 CITY	-ST-ZIP	-					6
TITLE		☐ DELETE 2.1 1		Ē				Change	e Addit	ion C
NAME	1		2.2 NAME							Ì
STREET ADDRESS			2.3 STR	2.3 STREET ADDRESS					_	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		Р	ى بىر يەتىپە خىسى 				
TITLE		☐ DELETE	3.1 TITL	E			[	Change	e 🗌 Addit	ion
NAME			3.2 NAM	ΙE				•		ì
STREET ADDRESS			3.3 STR	EET ADC	DRESS				•	
CITY-ST-ZIP			34. CIT	Y-ST-ZIF	<u>Р</u>					
TITLE		☐ DELETE	4.1 TITL	E	}		t	Change	e 🗌 Addit	ion
NAME			4, 2 NAN	ΛE						- [
STREET ADDRESS			4.3 STR	EET ADC	DRESS					-
CITY-ST-ZIP			4.4 CITY	-ST-ZJF	<u> </u>				·	
TITLE		☐ DELETE	5.1 TITL		]		1	Chang	e 🗌 Addit	tion
NAME			5.2 NAV							
STREET ADDRESS				EET ADO	- 1					
CITY-ST-ZIP				-ST-ZIF						
TITLE		☐ DELETE	6.1 TITL				l	Chang	e 🗌 Addit	uon
NAME			6.2 NAW							1
STREET ADDRESS				EETADO	- 1					1
CITY-ST-ZIP			6.4 CATY	-ST-ZIP	P	Carting 440 07/2/6) Florida Ctaturas I forther			a information	

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.

May 05, 1999 8:00 am Secretary of State

05-05-1999 90037 001 \*\*\*150.00