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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 17 1998 8:00am Secretary of State

Mainting Anthress Main		MENT # P9400 CAL LADDER & LIFTS, INC		(6)				I AHR HAN AND AND AND A
### PALIM BEACH FL 33409 ### Principal Place of Binness ### PALIM BEACH FL 33409 ### Principal Place of Binness ### Palim Beach FL 33409 ### Palim Beach FL 33414 ##	Principal Plac	e of Business	Mailing Address				{ 100 104 10 154 154 04 00 1 04 1 14	IS MESTAL COMPANTALISM SARA SANDS
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Suite April 4, etc. 27 City & State 28 29 20 Country 20 20 20 20 20 20 20 20 20 20 20 20 20	—	Place of Business	·	ess				<u> </u>
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City & States Country 29		#, e(c	1				5. Certificate of Status Desired	* *
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Zip	_	ici	the man				· · · · · · · · · · · · · · · · · · ·	
25		Country			Country			
MCALUSTER, WILLIAM S 2120 INDIAN RD. WEST PALM BEACH FL 33409 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11, Pursuant to the previsions of Sections 607 (E602 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and imminist with, under accept the ediptores of, Section COP 5005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and imminist with, under accept the ediptores of, Section COP 5005, Florida Statutes, such acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, such acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP 5005, Florida Statutes, and acceptable deligibles of, Section COP		<u> </u>) - ₁	30	n í		· · · · · · · · · · · · -	
2120 NINAN RD. WEST PALM BEACH FL 33409 *** *** *** *** ** ** ** **					1	,		
### City	Mí	CALLISTER, WILLIAM S			81	Name		
### STRET ADDRESS Balance					50	Dt 1 1-1-	75.0 S. N. J.	:
### BS B4 City FL B5 Zip Code 11. Pursuant to the provisions of Sections (27 0f 07 and 607 11:08, Florida Statutes.					62	Street Add	drass (P.O. Box Number is Not Acceptable)	
The Provisions to the provisions of Sections (A) 0502 and EOT 1608. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont 1 and namber with, and accept the obligations of, Section 607 0505, Floridal Statutes. SIGNATURE Suppose System public time of Inputs and Accept the Obligations of, Section 607 0505, Floridal Statutes. Signature Suppose System public time of Inputs and Section 607 0505, Floridal Statutes. Signature Suppose System public time of Inputs and Inputs and Section 607 0505, Floridal Statutes. Signature PD		zor trem bestort i z oo tob			83			
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Office or registered agont, or both, in the State of Frenchs Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont. I ment arminar with and accept the obligations of Sixtence 607 Object. Florida Statutes. SIGNATURE					84	City	FL	85 Zip Code
SIGNATURE Sign	11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florid	da Statutes,	the above	e-named cor	poration submits this statement for the purpose of	changing its registered
SignATURE Sign	office or i	registered agent, or both, in the State im familiar with, and accept the oblid	e of Florida. Such chan ations of, Section 607.	ge was auth 0505. Florid	iorized by a Statutes	the corpora	ation's board of directors. I hereby accept the app	ointment as registered
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TITLE	SIGNATURE	Signature, typest or portion partie of regent rest ala	ent and the if applicable	INOTE Re	agistered Age	nt signature requ	ulred when reinstating) DATE	
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City - 51 - 2ip WEST PALM BEACH FL 33414	NAME				1.2 NAME			
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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 affachment with an address.

SIGNATURE:

WILLIAM MCALLIST

2/11/98

561-640-3500