## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Aug 15 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1	MENT # P9400 POINT INDUSTRIES, INC	00071188 (4) c.	)		NATINI BONIN (2001) NJOON NINON (2012) NGAN (2014)
Principal Place of Business Mailing Address					18/11 88/17 1888) 1/88/1 1/88/1 18/18/18/18/18/1
2867 STONEWALL PL #101 2867 STONEWALL PL #101					
SANFORD FL 32773 SANFORD FL 32773			, i vi	DO NOT WOL	C IN THIS COACE
				3. Date Incorporated or Qualified	E IN THIS SPACE  3a. Date of Last Report
				09/28/1994	07/26/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3272390	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζiρ	Country	Zip	Country	8. This corporation owes or has p	i i and a single in the singl
24	25 9. Name and Address of Cur	rent Registered Agent	[30]	Personal Property Tax due Jun  10. Name and Address of New R	
SPARKS, MICHAEL A					
3129 CANTERBURY ST DELTONA FL 32738			82 Street Addr 84 32	ress (P.O. Box Number is Not Accepted 29 Canterbury	KS Y St
			84 City	11	85 Zip Code
			Ne.	Itona	FL   32738
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. I to 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 faithful any accept the obligations of Section 607.0505, Florida Statutes.					
1 0/1 1/1/2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
SIGNATURE	Gignature, typed or printed harry or registered		100 )TE Registered Agent signature requir	red when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	D ADADYO MICAURI A	DELETE	1.1 TITLE		Change Addition
NAME OTOTET APPOSES	SPARKS, MICAHEL A 3129 CANTERBURY ST		1.2 NAME		
STREET ADDRESS   CITY-ST-ZIP	DELTONA FL 32738		1.3 STREET ADDRESS 1.4-CITY - ST - ZIP		
TITLE	DECITOR TE OFFO	DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		☐ DELFTE	3.1 TETLE		Change Addition
NAME Street adoress			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		_ • •
STREET ADDRESS			4.3 STREET ADDRESS		:
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		_ occur	6.2 NAME		C VINNING C TOURING
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		'
14. I do hereb	by certify that the information supp	blied with this filling does not qua	lify for the exemption stated	d in Section 119.07(3)(i), Florida Statut	es. I further certify that the
i am an of appears in	flicer or director of the Oxporation n Block 12 or Block 13 if hanged	n or his receiver or trustee empo	wered to execute this report ddress.	on Section 119.07(3)(i), Florida Statut my signature shall have the same leg rt as required by Chapter 607, Florida	Statutes; and that my name