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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000071377 (3)

P & E INDUSTRIES, INC.

FILED Feb 18 1997 8:00am Secretary of State



Principal Place of B	lusiness	Mailing	Mailing Address P.O. BOX 810095 BOCA RATON Ft. 33481-0095				* 10811911 418 40 11 9 1011 80 111 80 111 80 111 111 111 111 1			
P.O. BOX B10095 BOCA RATON FL 33	3481-0095									
							3. Date Incorporated or Qualified 09/28/1994		e of Last F	Report
2. Principal Place of	of Business	2a. Ma	ailing Address			······································	4. FEI Number	»	A	oplied For
21		26					65-0535637		N	ot Applicable
Suite, Apt #, etc	Su 27	Suite, Apt. #, etc.				5. Certificate of Status Desired	S8.75 Additional Fee Required			
City & State			y & State				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Ζιρ	Country	Zir)	Cou	ntry	····	8. This corporation has liability for	intanoible i	ax under s	199.032.
24	25	29		30] No	,
	Name and Address of Curr	ent Registere	ed Agent				10. Name and Address of New R	egistered A	gent	
6760 E.	AN, JEFFREY A ROGERS CIRCLE ATON FL 33487				81 82 83 84	Street Addre	ass (P.O. Box Number is Not Accepta NW 1St Ct	ble)	85 49	Code
office or registe agent. I am fan	provisions of Sections 607 0 ered agent, or both, in the Sta niliar bith, and accept the ob-	ite of Florida. ligations of, Se	Such change was ection 607.0505, F	authorize Igrida Stat Mul-w	d by utes 1/2/1	-named corporation the corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose of pt the appo	changing in intment as	ts registered registered
12.		ND DIRECTO		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 12
TITLE D			DELETE	1.1 1)	TLE			,	Change	Addition
NAME H	ACKMAN, JEFFREY A			1.2 N	AME	}				
	O. BOX 810095, N/A			1.3 5	REET	address				
	OCA RATON FL 33481-00	95		1,4 0	TY-ST	-ZIP				•
TITLE		- <u> </u>	DELETE	21 TI					Change	Addition
NAME				2.2 N	ME					
STREET ADDRESS				235	REET A	ADDRESS .				
CITY-ST-ZIP				2.40	ITY-S	T-ZIP				
TITLE			DELETE	3.1 11	TLE				☐ Change	Addition
NAME				3.2 N	AME					
STREET ADDRESS				3.3 S	TREET .	ADDRESS				
CITY-ST-ZIP				3.4. C	ITY-S	T-ZIP				
TITLE			DELETE	4.1 %					Change	Addition
NAME				4.2 N	AME					
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CITY - ST - ZIP					TY-\$1					
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NAME				5.2 N					•	
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				- 1	ITY-SI					
CITY-ST-ZIP TITLE			☐ DELETE	6.1 TI		- 611			Change	Additio
NAME				6.2 N		1				erend / IOO/IIQ
1						ADDRESS				
STREET ADDRESS				1	ncti	ADDRESS				
CITY-ST-ZIP					ITY-SI	t team				

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.

SIGNATURE: