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

PROFIT CORPORATION ANNUAL REPORT

1998



LLOOKA DEDARMATATOR OLAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

i ·	MENT # P9500(MACHINERY SERVICES, INC	=)			18 XIBD BURD XIAI XIAI CA
Principal Place of Business Mailing Address						IE OVOBY BYKOD YNIBY YNDY LDDY
3921 SPRING	GARDEN LANE	3921 SPRING GARDEN	LANE			
ESTERO FL 3		ESTERO FL 33928		DO NOT WRITE IN THIS	CDACE	
					3. Date Incorporated or Qualified	SPACE
					06/01/1995	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0590135	Not Applicab	
Suite, Apt	#, etc	Suite, Apt. #, etc	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired	\$8.75 Additional
22	 	[27]			6, Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23 Zin	T Galaku	[28]	Cour	her.	Trust Fund Contribution	Added to Fees
Zip	Country	Z(p)	Cour	nr y	This corporation owes or has paid the cur Personal Property Tax due June 30.	rrent year Intangiblo ☐ Yes ☐ No
24	9, Name and Address of Curren	29] It Registered Agent	130	<u>.</u>	10. Name and Address of New Registered	
RAI	RBARA B BRADSHAW			81 Name		T
3921 SPRING GARDEN LANE				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
FOUNTAIN LAKES				Sireer Auc	dress (P.O. Box Number is Not Acceptable)	
	TERO FL 33928		Ī	B3		
			}	84 City		85 Zip Code
				1 "	FL	. '
SIGNATURE	Signature typod or printed name of registrated acc	or and tille diapple able. (N	OTE Registered		rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appulied when reinstating) DATE	
12.	PSTD OFFICERS AND	DELETE	13.	, 	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	BRADSHAW, BARBARA B	L Dittit	1.3 MA			□ cuange □ Audum
STREET ADDRESS	3921 SPRING GARDEN LANE			EET ADDRESS		
CITY-\$1-ZIP	ESTERO FL 33928		•	Y-ST-21P		
TITLE	EUIENO I E GOSEO	☐ DELETÉ	2 1 711			☐ Change ☐ Addition
NAME			2 2 NAI			_ •
STREET ADDRESS			2.3 517	EET ADDRESS		
CITY - ST - ZIP			2 4 Cri	Y-ST-ZIP	•	
TITLE		☐ DELETE	3.1 1(1)	.E		Change Addition
NAME			3.2 NAI	JE		
STREET ADDRESS			3 3 STF	EET ADORESS		
CITY-ST-ZIP				Y-S1-ZIP	7	
TITLE		☐ DELETE	4.1 10	i		Change Addition
NAME			4 2 NA			
STREET ADDRESS				EFT ADDRESS		
CHY-ST-ZIP TITLE		DELETE	4 4 CIT	Y-ST-ZIP		Change Addition
		_ otter	5 7 1110 5 2 NAI	- 1		El Allaride El Modille
NAME STREET ADORESS						
- · · · · · · · · · · · · · · · · · · ·				EET ADORESS		
CITY-ST-ZIP TITLE		DELFTE	5.4 CH	Y · ST - ZIP		☐ Change ☐ Addition
NAME			6.2 NAJ	1		_ ,
STREET ADDRESS				LET ANDRESS		

14. Thereby 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 suppliemental 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 exposured for fusion or the received or fusion exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cyangud, or on an attaching much an address.

SIGNATURE:

BARBARA B. BRADSHAW 4-24-98

4-24-98 (941)947-1218

FILED

Apr 30 1998 8:00am

Secretary of State