## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P95000045519 (2)

1. Corporation Name LIMCO, INC.



Principal Place of Business				Mailing Address			n consiseer 1940 seiser mist, edets edets edets edets estell estell eiter (ett) 106/0 (ett) 106/0		
4102 WASHINGTON RD. WEST PALM BEACH FL 33405			4102 Washington Rd. West Palm Beach Fl 33406						
		T. N. M					3. Date incorporated or Qualified 06/06/1995	3a. Date of t	ast Report
Principal Place of Business			F	2a. Mailing Address			4. FEI Number	.L	Applied For
Suite, Apt. #, etc			26	·		65-05984	481	Not Applicabl	
22			2	Suite, Apt #, etc		5. Certificate of Status Desired	□ \$	8.75 Additional	
City & State	e		27	City & State					Fee Required
23			28	Oity & State			6. Election Campaign Financing		5.00 May Be
Zip	С	ountry		Zφ	Cour	ntrv	Trust Fund Contribution		Added to Fees
24	25		29		30	,	This corporation has liability for in Florida Statutes		ders 199.032,
	9. Name and A	ddress of Curre	nt Regis	tered Agent			10. Name and Address of New R		
						B1 Name		egiotorea Ager	
SUSSE	r, gary e					82 Street Ad	44 (D.C) D- M		
	2755 S. FEDERAL HWY.				["	Street Ad	ddress (P.O. Box Number is Not Acceptab	le)	
BOYNT	ON BEACH FL 3	3435			1	93		<del></del>	
						10.			
<del>-</del> <del></del>	· · · · · · · · · · · · · · · · · · ·					34 City		FL B5	
11 Pursuant t	to the provisions of	Sections 607.050	2 and 607	7 1508, Florida Stat	utes, the above	e named corp	poration submits this statement for the pur		its resistance of a
familiar wit	th, and accept the o	obligations of, Sec	tion 607,0	i change was authoi 0505, Florida Statut	inzed by the co les	rporation's b	poration submits this statement for the purporation directors. I hereby accept the appo	pintment as regis	tered agent I am
SIGNATURE									
	Signature, typed or proted				NOTE PAINTER A	gent signal instruction	ited When terrish daily	DATE	
12. TITLE	_ <b>D</b>	OFFICERS AN	<u>id direc</u>	TORS	13.		ADDITIONS/CHANGES TO OFFI		CTORS IN 12
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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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

407-135-4233