

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000052646 (3)

1. Corporation Name

SOUTHERN SCIENTIFIC INDUSTRIES, INC.



Principal Place of Business

Mailing Address

1901 SOUTH HARBOR CITY BOULEVARD, #805
MELBOURNE FL 32901

1901 SOUTH HARBOR CITY BOULEVARD, #805
MELBOURNE FL 32901

3. Date Incorporated or Qualified
06/23/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 376 N. Lakeside Dr.

26 376 N. Lakeside Dr.

4. FEI Number

Applied For

59-3326617

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

23 Satellite Beach, FL

28 Satellite Beach, FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Country

Zip

Country

24 32937

25 USA

29 32937

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MURPHY, JOHN T

1901 SOUTH HARBOR CITY BOULEVARD, #805
MELBOURNE FL 32901

81 Name

Robert V. Day

82 Street Address (P.O. Box Number is Not Acceptable)

376 N. Lakeside Drive

83

84 City

Satellite Beach FL

85 Zip Code

32937

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, or both, in 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Robert V. Day, Robert V. Day, President

3/1/1996

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

President

☐ Change

☒ Addition

NAME

1.2 NAME

Robert V. Day

STREET ADDRESS

1.3 STREET ADDRESS

376 N. Lakeside Drive

CITY- ST- ZIP

1.4 CITY- ST- ZIP

Satellite Beach, FL 32937

TITLE ☐ DELETE

2.1 TITLE

Secretary/Treasurer

☐ Change

☒ Addition

NAME

2.2 NAME

Pamela H. Day

STREET ADDRESS

2.3 STREET ADDRESS

6039 Queensway ST.

CITY- ST- ZIP

2.4 CITY- ST- ZIP

Springfield, VA 22152

TITLE ☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY- ST- ZIP

3.4 CITY- ST- ZIP

☐ Change

☐ Addition

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

☐ Change

☐ Addition

TITLE ☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY- ST- ZIP

5.4 CITY- ST- ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY- ST- ZIP

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE:

Robert V. Day

3/1/1996

569-5816

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)