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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 06 1998 8:00am Secretary of State

D	1998		ORPORATIONS		iry or state	
	MENT # P9500(SMALL ENGINE, INC.	065822 (5) 	il.			
			••			
Principal Plac	e of Business	Mailing Address		E LABELIDAE IND INVINE DIVER BREIN ORINI AI	NOVE MANCE MICHOL MICHEL CONTINUES STATE COMPL	
6138 SE ROBINSON ROAD 6138 SE ROBINSON ROAD BELLEVIEW FL 34420 BELLEVIEW FL 34420					经证据 医神经节 电电影 網攤	
DECTEALEM L	L 34420	BELLEVIEW FL 34420		DO NOT WRIT	E IN THIS SPACE	
				3. Date Incorporated or Qualified		
9 Principal P	lace of Business	2a. Mailing Address		08/24/1995 4. FEI Number	Applied For	
21	lace of gasiness	26		65-0622652	Applied For Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	θ	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	7 _{IP}	Country	Trust Fund Contribution	Added to Fees	
24	25	- -¬	30	This corporation owes or has p Personal Property Tax due Jun		
	9. Name and Address of Curren			10. Name and Address of New R		
	ran, dale v		81 Name			
6138 SE ROBINSON ROAD			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
BE	LLEVIEW FL 34420		83			
			63			
i			84 City		FL 85 Zip Code	
office or r agent. I a SIGNATURE	to the provisions of Sections 607.050. registered agent, or both, in the State in familiar with, and accept the obligation Stynawe, typed or profited name of registered agents.		is, the above-named corporal rida Statutes. Registered Agent signature requi	coration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered opt the appointment as registered	
12.	OFFICERS ANI	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI		
TITLE	PST	☐ DELETE	1.1 TITLE		Change Addition	
NAME	OHREN, DALE V		1.2 NAME			
STREET ADDRESS	6138 SE ROBINSON RD BELLEVIEW FL 34420		1.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	BELLEVIEW FL 34420	DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY+ST-ZIP			
TITLE		☐ DELETE	3 1 TITLE	•	Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CHY-ST-ZIP 4.1 TITLE		Change Addition	
NAME		_	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
FITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME OVERT ADDRESS			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 THLE		Change Addition	
NAME			6.2 NAME		• <u> </u>	
STREET ADDRESS			6.3 STREET ADDRESS		•	
CITY CT 710			CACITY OF NO			

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 corporation or the receiver or trules 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 organization and the receiver of the corporation of the receiver of the

SIGNATURE:

V. OHRAN

2/4/98

352/245.5652