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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070397 (1)

E. & D. MAINTENANCE AND REPAIR, INC. Principal Place of Business Mailing Address 5804 W STRAUSS LOOP PLANT CITY FL 33565 MAINTENANCE AND REPAIR, INC. Mailing Address 5804 W STRAUSS LOOP PLANT CITY FL 33565-3740							
					3. Date Incorporated or Qualified 09/08/1995	3a. Date of Last Repo 05/01/1996	ort
	Piace of Business	2a. Mailing Address	2a. Mailing Address 26		4. FEI Number 59-3338315	}	ed For
Surte, Apl	l. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Add	
City & Sta	ale	City & State	•		6. Election Campaign Financing	\$5.00 ма	
23		28			Trust Fund Contribution		- - -
Zip 24	Country Zip		Count	ry	8. This corporation has liability for intangible tax under s. 199.0 Florida Statutes		9.032,
24	9. Name and Address of Curre		1301		10. Name and Address of New Re		
PIF	PPIN, TARANCE E		8	1 Name			
	04 W STRAUSS LOOP		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
PL	ANT CITY FL 33565		8	1			
			8	4 City		FL 85 Zip Coo	de e
SIGNATURE	Signature, typical or printed name of registered a	agent and title if applicable (NO			rporation submits this statement for the pation's board of directors. I hereby acception when reinstating. ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS II	N 12
TITLE	D	DELETE	1.1 TOLE	:		[_] Change [_	Addition
NAME	PIPPIN, TARANCE E 5804 W STRAUSS LOOP		1.2 NAM	1			
STREET ADDRESS CITY+ST-7IP	PLANT CITY FL 33565		1	ET ADDRESS -ST-ZIP			
THLE	D	DELETE	2.1 TITLE			Change	Addition
NAME	BRANNON, DANIEL		2.2 NAM	E			
STREET ADDRESS	***************************************		- 1	ET ADDRESS			
CITY+ST-2IF TITLE	PLANT CITY FL	DELETE	2. 4 City 3.1 Titls	r-ST-ZIP	,	Change	Addition
NAME		beatt	3.2 NAM				
STREET ADDRESS	3		3.3 STRE	ET ADDRESS			
CITY - S1 - ZIP		T AFI FIA		(-ST-ZIP		71 At	1.334.
TITLE		DELETE	4.5 TITLE			Change	Addition
NAME STREET ADDRESS			4. 2 NAN 4.3 STRE	ET ADDRESS			
City-St-7iP				-ST-ZIP			
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE 5				Change	Addition
NAME			52 NAM	1 '			
STREET ADDRESS	5		- 1	ET ADDRESS			
CITY-\$1-ZIP TITLE		DELETE	6.1 YiTLE	-ST-ZIP		Change C	Addition
NAME		*****	6.2 NAM			• -	
STREET ADDRESS	;		6.3 STRE	FT ADDRESS			

14. I do hereby 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that ham 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.

6.4 CITY-ST-ZIP