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May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000071112 (3)

1. Corporation Name
FOCUSEAL, INC.



Principal Place of Business

2169 TRADE CENTERWAY
NAPLES FL 33942
US

Mailing Address

2169 TRADE CENTERWAY
NAPLES FL 33942
US

3. Date Incorporated or Qualified
09/14/1995

3a. Date of Last Report
02/05/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 34109

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 34109

30

4. FEI Number
65-0620141

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

PRICE, MARK J
850 PARK SHORE DR
TRIANON CENTER THIRD FLOOR
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
Jonathan D. Fishbane
82 Street Address (P.O. Box Number is Not Acceptable)
850 Park Shore Drive
83 Trianon Centre, Third Floor
84 City
Naples
85 State
FL
86 Zip
34103

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 *Jonathan D. Fishbane*

Jonathan D. Fishbane, Attorney @ Law

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when removing)

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
RADTKE, THOMAS J
8196 LOWBANK DR
NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
VP
RADTKE, KARL O
8196 LOWBANK DRIVE
NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SAT
RADTKE, ANDREA B
8196 LOWBANK DRIVE
NAPLES FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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 as an attachment with an address.

SIGNATURE:

Thomas J. Radtke, President

CR2E034 (9/96)