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

PROFIT
CORPORATION
ANNUAL REPORT
1998
DOCUMENT #



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

<b></b>	1000				<b>→</b>		
1. Corporation	MENT # P9500 Industries, Inc.	00076906 (3)					
1					i indicato cua falsi artic anci anci dalli dalli sari	I <b>alia d</b> hea iani e	AND ALL THE
		_					
Principal Place	e of Business	Mailing Address			) (Aarsons off sorns acres must bares ander divin	filosa Reica sátes Al	Stiff Bath (AA)
1627 FAIRFIELD CIRCLE NE P.O. BOX 60305							
PALM BAY FL 32905 US		PALM BAY FL 32905	PALM BAY FL 32905 US		DO NOT WRITE IN THIS SPACE		
05		US			3. Date Incorporated or Qualified		
					10/02/1995		i
	lace of Business	2a. Mailing Address			4. FEI Number	Ar	pplied For
21 26					59-3338057	<del></del>	ot Applicable
Suite, Apt. #, etc Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional equired
City & State	n	City & State			6 Floation Compagion Financian		
23	28				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	<b>Z</b> ip	Country		8. This corporation owes or has paid the c		
24	25		30		Personal Property Tax due June 30.		No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent	
	ANDINO, FRANCES M	•	81	Name			
1690 FAIRFIELD CIR NE			82	Street Add	ress (P.O. Box Number is Not Acceptable)	_	
PA	LM BAY FL 32905		83				
			84	City	F	<b>L</b> 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-	named corp			ts registered
office or r agent. I a	egistered agent, or both, in the Stati im familiar with, and accept the oblig	e of Florida, Such change was a jations of, Section 607,0505, Flo	iuthorized by l irida Statutes.	the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as	registered
SIGNATURE							
	Signature, typed or printed name of registered ag	pent and title if applicable (NOTE ND DIRECTORS		t signature requi	red when reinstating) DATE	UD DIDECTOR	OC IN 10
12.	D OFFICERS AN	ERS AND DIRECTORS 13.  DELETE 1.1 TITLE		<del></del> 7	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
NAME	BLANDINO, JAMES		1.2 NAME				
STREET ADDRESS			1.3 STREET A	DORESS			
CITY-ST-ZIP	PALM BAY FL		1.4 CITY-ST-ZIP				
TrTLE	VP .	☐ DELETE	2.1 TITLE	7		Change	Addition
NAME	BLANDINO, JOSEPH E		22 NAME				ĺ
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	PALM BAY FL	Price	2.4 CITY-ST	- ZIP		TT Change	Addition
TITLE NAME	D Blandino, Frances M	DELETE	3.1 TITLE 3.2 NAME			Change	☐ Addition
STREET ADDRESS	AARA ELINEWIA AIR LIE		3.3 STREET A	DUDEGG			
CITY-ST-ZIP	PALM BAY FL 32905		3.4. CITY-ST	- 1			ì
THILE		DELETE	4.1 TITLE		A 6 7 4 - Education	Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET A	DDRESS			
CITY-ST-ZIP			4.4 CITY-ST-	ZIP			
TITLE			5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				i
STREET ADDRESS			5.3 STREET A	- 1			ļ
CITY-ST-ZIP TITLE		DELETE	5.4 City-St-	ZIP		☐ Change	Addition
NAME		EJ OLCCIE	6.1 IIILE 6.2 NAME			□ outsing c	emp reductions
STREET ADDRESS			6.3 STREET A	DORESS	•		
SINCE ADDRESS			0.5 STREET A				

14. I 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 on an attachment with an address

SIGNATURE: Frances In Blanden

4/1/98

**FILED** 

May 06 1998 8:00am

Secretary of State