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

DOCUMENT # P95000084795 (0)

INDUSTRIAL SALES AND SUPPLY, INC.

| 21 | INDUSTRIAL DALLS AND SC | , | | | | |
|----|---|--|--|----------------------------------|--|--|
| E. | Principal Place of Business Mailing Address | | | | | |
| 3 | 3007 HEATHER GLYNN DR MULBERRY FL 33860 | 3007 HEATHER GLYNN DR Mulberry Fl 33860 | DO NOT WRITE IN THIS | S SPACE | | |
| 1 | | | Date Incorporated or Qualified 11/01/1995 | | | |
| _ | 2. Principal Place of Business | 2a. Mailing Address | 4, FEI Number | Applied Fo | | |
| | 21 | 26 | 59-3343831 | Not Applic | | |
| | Suite, Apt. #, etc. | Suite, Apt. #, etc. | 5, Certificate of Status Desired | \$8.75 Additions Fee Required | | |
| | City & State | Cily & State | Election Campaign Financing | \$5.00 May Be | | |

Zip

29

JAC**ob**s, dale g 3007 HEATHER GLYNN DR MULBERRY FL 33860

25

Country

g. Name and Address of Current Registered Agent

| | | Б. | Trust Fund Contribution | , | ded to Fees |
|-----------|-------------|--------|--|--------------|---|
| Country | | В. | This corporation owes or has paid the Personal Property Tax due June 30. | current year | ar Intangible |
| | • | 10. | Name and Address of New Registe | red Agent | |
| 81 | Name | | | | |
| 82 | Street Addr | ess (F | P.O. Box Number is Not Acceptable) | | • |
| B3 | | | · | | |
| | | | | | |

U 14.90

FILED

Apr 22 1998 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional Fee Required

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.

30

| SIGNATURE | | | | |
|----------------|---|---------------|--------------------|---|
| | Signature, typod or printeo name of registered agent and tibr if applicable | (NOTE: Re | | required when reinstating) DATE |
| 12. | OFFICERS AND DIRECTORS | c. : | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | P DE | tLt It | 1.1 TRILE | ☐ Change ☐ Addition |
| NAME | COBB, DAVID E | | 1.2 NAME | |
| STREET ADDRESS | \$0 07 HEATHER GLYNN DR | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MULBERRY FL 33860 | | 1.4 CHY-ST-ZIP | |
| TITLE | D6 | ELETE | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 1 | 2.2 NAME | : |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | i e e e |
| CITY-ST-ZIP | | | 2.4 CITY-ST-ZIP | |
| TITLE | □ DE | ELETË | 3.1 TITLE | Change Addition |
| NAME | | | 32 NAME | |
| STREET ADDRESS | | | 3 3 STREET ADDRESS | |
| CITY-ST-ZIP | _ | | 3.4. CITY-ST-ZIP | |
| TITLE | DE | ELETE | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 1 | 4. 2 NAME | |
| STREET ADDRESS | | i | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | |
| TITLE | DE | ELE TE | 5.1 TITLE | Change Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | |
| TITLE | ☐ DE | ELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| | | | | |

64 CITY-ST-ZIP

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, are on an attachment with an address.