

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

032942

PROFIT CORPORATION ANNUAL REPORT 1999




FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000088348
1. Corporation Name
INDUSTRIAL TURBINE SUPPORT, INC.
AMENDED 1999

Principal Place of Business
3910 RCA BLVD. STE 1008
PALM BEACH GARDENS FL 33410
US

Mailing Address
3910 RCA BLVD., STE. 1008
PALM BEACH GARDENS FL 33410

APPROVED
11/10/1995
59 SEP - 7 10:10:10
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		11/10/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0622850	
City & State		City & State		Applied For	
23		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29		<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		6. Election Campaign Financing	
25		30		<input type="checkbox"/> Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes the current year Intangible Personal Property Tax.	
LADD, MICHAEL 3910 RCA BLVD., SUITE 1008 PALM BEACH GARDENS FL 33410				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LADD, MICHAEL 3910 RCA BLVD., SUITE 1008 PALM BEACH GARDENS FL 33410				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	
				FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Thomas J. Nangle
NAME	NANGLE, THOMAS J	1.2 NAME	23 S. Ridgeview Rd.
STREET ADDRESS	23 S RIDGEVIEW RD	1.3 STREET ADDRESS	Stuart, FL
CITY-ST-ZIP	STUART FL	1.4 CITY-ST-ZIP	
TITLE	VPSD	2.1 TITLE	President / Director
NAME	O'NEILL, FRANCIS	2.2 NAME	O'Neill, Francis
STREET ADDRESS	1085 ROBLE WAY	2.3 STREET ADDRESS	2103 Cove Lane
CITY-ST-ZIP	PALM BEACH GARDENS FL	2.4 CITY-ST-ZIP	Palm Beach Gardens, FL
TITLE	VPTD	3.1 TITLE	Sr. Vice President / Sect. / Treas. / Director
NAME	LADD, MICHAEL A	3.2 NAME	Ladd, Michael A.
STREET ADDRESS	1095 ROBLE WAY	3.3 STREET ADDRESS	1095 Roble Way
CITY-ST-ZIP	PALM BEACH GARDENS FL	3.4 CITY-ST-ZIP	Palm Beach Gardens, FL
TITLE		4.1 TITLE	Director
NAME		4.2 NAME	Henneberger, John
STREET ADDRESS		4.3 STREET ADDRESS	4 Carrick Road
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE		5.1 TITLE	
NAME		5.2 NAME	200002988202--2
STREET ADDRESS		5.3 STREET ADDRESS	-09/15/99--01091--001
CITY-ST-ZIP		5.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael Ladd* Michael Ladd 9/2/99 (561)626-8900

CR2E034 (11/98)