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FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000088667 (7)

1. Corporation Name
CLASSIC SANDBLASTING, INC.

Principal Place of Business

Mailing Address

6114 NUNDY AVENUE
GIBSONTON FL 33534

PO BOX 625
GIBSONTON FL 33534-0626
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1995

4. FEI Number

59-3344174

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

POOLE, MARY E
6114 NUNDY AVENUE
GIBSONTON FL 33534

10. Name and Address of New Registered Agent

81 Name

Robert H. Poole III

82 Street Address (P.O. Box Number is Not Acceptable)

6114 Nundy Ave

83

Gibsonton

84 City

Gibsonton

FL

85 Zip Code

33534

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, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert H. Poole III*
Signature, typed or printed name of registered agent and title if applicable

Robert H. Poole III

(NOTE: Registered Agent signature required when reinstating)

DATE: Apr. 29, 1998

12. OFFICERS AND DIRECTORS

TITLE PD
NAME POOLE, ROBERT H III
STREET ADDRESS 6114 NUNDY AVENUE
CITY-ST-ZIP GIBSONTON FL 33534 ☐ DELETE

TITLE VD
NAME POOLE, ROBERT H IV
STREET ADDRESS 6114 NUNDY AVENUE
CITY-ST-ZIP GIBSONTON FL 33534 ☐ DELETE

TITLE STD
NAME POOLE, MARY E
STREET ADDRESS 6114 NUNDY AVENUE
CITY-ST-ZIP GIBSONTON FL 33534 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

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 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 a 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: *Robert H. Poole III* Apr 29 1998 813-677-1893

CR2E034 (10/97)