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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9600003306 (3)

## FILED Apr 24 1998 8:00am Secretary of State

CIC 4		` '				
5JG M	ACHINE, INC.	4			T TO BE LEVEL AND A SECOND SECOND SECOND SECOND SECOND SECOND	BANN DANA NNA NINI BANT AND 1000
Principal Plac	e at Business	Mailing Address				<b>il</b> in <b>siiti</b> hiii ila siit jii itti
			NRTH.			
10975 - 49TH STREET NORTH 10975 - 49TH STREET N			KIH		<u> </u>	
CLEARWATER FL 34622 CLEARWATER FL			22		DO NOT WRITE IF	N THIS SPACE
ļ					3. Date Incorporated or Qualified	
					01/08/1996	
2. Principal P	face of Business	2a. Mailing Address	•	. <del>.</del>	4. FEI Number	Applied For
21 26					59-3360522	Not Applicable
<u> </u>		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22 27						Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23 28 28					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	,	8. This corporation owes or has paid	the current year Intangible
24	25		30		Personal Property Tax due June 3	
	g, Name and Address of Curr	ent Hegistered Agent	81	Name	10. Name and Address of New Regi	stereo Agent
	AY, SCOTT J		"	INAILIO		
	975 - 49TH STREET NORTH		82	Street Add	ress (P.O. Box Number is Not Acceptable	)
1	IT 8		-			
CL	EARWATER FL 34622		83			
			84	City		85 Zip Code
				-		FL
11. Pursuant	to the provisions of Sections 607.0	i502 and 607 1508, Florida Statute	es, the above	e-named cor	poration submits this statement for the puration's board of directors. I hereby accept	pose of changing its registered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505, Flo	rida Statutes	ine corpora 3.	alion's board of directors, Thereby accept	the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered	. <del>.</del>		int signature requ	ired when reinstating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	D					Change Addition
NAME	GRAY, SCOTT J		1.2 NAME			
STREET ADDRESS			1 3 STREET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 34622		1.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			Į.
STREET ADDRESS			2.3 STREET	ADDRESS		i
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			<del></del>
TITLE	DELETE		3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4. CITY - 9	ST-ZIP		
TITLE	DELETE		4.1 TITLE			Change Addition
NAME			4. 2 NAME			i
STREET ADDRESS			4.3 STREET	ADDRESS		· ·
CITY-ST-ZIP			44 City-S	T-ZIP		
TITLE			5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP	•		5.4 CITY - S	ì		Ì
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			ľ
STREET ADDRESS			63 STREET	ADDRESS		ı
CITY-ST-ZIP			6.4 CITY - S			
ALLI-DI-TIE			V UIII-3	. 411		

14. Thereby 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 amount 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 frustee 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:

Now My

Scott J. Gray

4-16-98

573-0986