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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600003306 1. Corporation Name

SJG MACHINE, INC.

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90129 049 ***150.00



Principal Place of Business	Mailing Address		i i		
10975 - 49TH STREET NORTH UNIT 8 CLEARWATER FL 34622	10975 - 49TH STREET NORTH UNIT 8 CLEARWATER FL 34622		DO NOT WRITE IN THIS SPACE		
,			3. Date Incorporated or Qualifed 01/08/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
· · · · · · · · · · · · · · · · · · ·	26		59-3360522	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	1.**	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip Co 29 30	untry	This corporation owes the current year In Personal Property Tax.	tangible ☐ Yes ☑ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
GRAY, SCOTT J 10975 - 49TH STREET NORTH		81 Name 82 Street Address (P.O. Box Number is Not Acceptable)			
UNIT 8		83			
CLEARWATER FL 34622					
		84 City	Fl	85 Zip Code	
 Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga 	of Florida. Such change was authorize	ed by the corporation	ration submits this statement for the purpose on's board of directors. I hereby accept the appoint	f changing its registered sintment as registered	

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change DELETE 1.1 TITLE TITLE GRAY, SCOTT J 1.2 NAME NAME 10975 - 49TH STREET NORTH, UNIT 8 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34622** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Change ☐ Addition TITLE CONTRACT OF THE SERVICES 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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: