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**

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90255 004 ***150.00

1. Corporation								
PINELLAS OUTBOARDS & MACHINE, INC.								
Principal Place	e of Rusiness	Mailing Address		 -		اللالة (1010 1010). مراجعة	(I)(D)O ((II))DO(
9075 130TH AVENUE NORTH 9075 130TH AVENUE NORTH						4 2	•	
UNIT E		UNIT E						
LARGO FL 34643 LARGO FL 34643		LARGO FL 34643			DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualifed 01/17/1996			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21	26				59-3355230		Not Applicable	
Suite, Apt. #; etc.*** Suite, Apt. #, etc.***					5. Certificate of Status Desired		Additional Required	
22		City & State						
City & Stat 23	<u>·</u>	28			6. Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees	
Zip	Country 25	Zip 30	Country		This corporation owes the current year In Personal Property Tax.	tangible Yes	MNo +	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
DOL	EV DIOLIAND A		81	Name	•		à	
BOLEK, RICHARD A 1992 BONNIE COURT			82	Street Ad	dress (P.O. Box Number is Not Acceptable)	<u>;:-</u>	4,;;;	
DUN	EDIN FL 34698		83		,	F (1) (1)	- '*', '	
			84	City	FL	85 Zip	Code	
SIGNATURE	Signature, typed or printed name of registered agent		istered Ager	nt signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	
12.	P OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/OFFACES TO OFFICERS A	Change		
NAME	LENO, JAMES A		1.2 NAME				_	
STREET ADDRESS	COTE ACOTEL AVE AL		1.3 STREET	ADDRESS			}	
CITY-ST-ZIP	LARGO FL		1.4 CITY-S					
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAME	- -	··· / ··· · · · · · · · · · · · · · · ·	•		
STREET ADDRESS			2.3 STREE	ADDRESS				
CITY-ST-ZIP			2.4 CITY-5	T-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME		·			
STREET ADDRESS			3.3 STREET				ļ	
CITY-ST-ZIP		□ OELETE	3.4. CITY-S 4.1 TITLE	T-ZIP		Change	Addition	
TITLE		, OFEETE	4.1 MLE					
NAME OTDEET ADDRESS			4.3 STREE	ranneess.				
STREET ADDRESS	1	,	4.4 CITY-S				Ì	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	· -"-		☐ Change	Addition	
NAME	}		5.2 NAME		•			
STREET ADDRESS	_		5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	B ☐ Addition	
NAME			6.2 NAME		•		1	
STREET ADORESS			6.3 STREET					
	1		64 CITY-S	t₌ZIP I			l l	

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:

olquired

Daytime Phone #