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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 21 1998 8:00am Secretary of State

DOCUMENT # P9600039457 (2) **WILLIAMS SCIENTIFIC COMPANY**									
Principal Place of Business Mailing Address							- • (***********************************	181 00100 01110 00111 041	
	O OVERSEAS HIGHM	VAY EE4		96000 OVERSEAS HIGHWAY EE-4					
KEY LARGO FL 83037 KEY LARGO FL 33037							DO NOT WRITE	IN THIS SPACE	
							3. Date Incorporated or Qualified		
							05/02/1996		
_	ncipal Place of Busi	iness	2a. Mailing Address				4, FEI Number		Applied For
21		26				65-0683605		Not Applicable	
	ite, Apt. #, etc.	 	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional B Required	
22 Cit	y & State	27 City & S	City & State			Election Campaign Financing			
23	, = 55		— ´	28			Trust Fund Contribution		00 May Be led to Fees
Zip		Country	Zip		Country		8. This corporation owes or has pa		
24		25	29				Personal Property Tax due June 30. X Yes No		
		and Address of Current	10. Name and Address of New Re	gistered Agent	·				
WILLIAMS, WILLIAM D 81 Name						Ð			
96000 OVERSEAS HIGHWAY EE-4					B2 Stree	t Addre	ss (P.O. Box Number is Not Acceptab	le)	·
KEY LARGO FL 33037					83				
					83				
								FL 85	Zip Code
11. Pr	irsuant to the provis	sions of Sections 607 0502	2 and 607 1508	Florida Statute	s the shove-name	d corpr	ration submits this statement for the p	urooso of obonois	no its registered
of ac	fice or registered ag gent. I am f a miliar w	gent, or both, in the State with, and accept the obligation	of Florida. Such itions of, Section	change was at 607.0505, Flor	uthorized by the co ida Statutes.	rporatio	on's board of directors. I hereby accep	t the appointmen	t as registered
SIGNA	ATURE	d or printed name of registered agor	d and the d applicable	AVOTE	Registered Agent signate		duban reinstat an	DATE	
12.	Signature, typec	OFFICERS AND		. (NOTE.	13.	re reguired	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	D		· · · · · · · · · · · · · · · · · · ·	DELETE	1.1 TITLE	T		☐ Chan	
NAME		MS, WILLIAM D			1.2 NAME				
STREET ADDRESS 96000 OVERSEAS HIGHWAY			EE-4	1.3 STREET ADDRESS					
CITY-ST	-ZIP KEY LA	ARGO FL 33037			1.4 CITY-ST-ZIP				
TITLE				DELETE	21 TITLE			☐ Chan	ge 🔲 Addition
NAME					22 NAME				
STREET A	VD DRESS				2.3 STREET ADDRESS	1			
CITY-ST	-ZIP			DELETE	2. 4 CITY - ST - ZIP			По	
TITLE			L	DELETE	3.1 TITLE			L Chan	ge L. Addition
NAME	unhoroc .				3.2 NAME				-
STREET A					3.3 STREET ADDRESS 3.4. CITY - ST - ZIP	·			l
CITY-ST TITLE	- ZIF		<u>-</u>	DELETE	4.1 TITLE	+		☐ Chan	pe Addition
NAME			_		4. 2 NAME				
STREET A	ADDRESS .				4.3 STREET ADDRESS	1			
CITY-ST	1				4.4 CITY - ST - ZIP				
TITLE				DELETE	5.1 TITLE			☐ Chan	ge 🔲 Addition
NAME					5.2 NAME				
STREET A	DDRESS				5.3 STREET ADDRESS				
CITY-ST	- ZIP	· · · · · · · · · · · · · · · · · · ·		-	5.4 CITY-ST-ZIP			·	
TITLE	:			DELETE	61 TITLE			Chan	ge 🔲 Addition
NAME					6.2 NAME				1
STREET A	DORESS				6.3 STREET ADDRESS	1	•		
CITY-ST					6.4 CITY-ST-2IP				

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.

SIGNATURE:

Willes Millelling WILLIAM

D. WILLIAMS /10

Zor wen Ace

CR2E034 (10/9