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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600046379 (9)

STATE CERTIFIED SCALES CORPORATION

FILED Mar 12 1998 8:00am Secretary of State



Principal Place of Business 2215 AMESSURG CT. WELLINGTON FL 33414 Mailing Address 2215 AMESSURG CT. WELLINGTON FL 33414				I ISBNIOSO 210 IDIUS BILLI BRILL BELLI DELLI DELLI DIRID DIIDO 31111 IBB	0 12811081 310 10118 01111 08111 88111 0E115 0B151 B1810 01100 41111 18018 1011 4001		
					DO NOT WRITE IN THIS SPACE		
					 Date Incorporated or Qualified 05/24/1996 		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Ap	plied For	
21		26 2215 AM	2215 AMESBURY CT.		65-0798581 No	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75	dditional	
27					Fee Re	quired	
City & State	e	City & State	City & State		6. Election Campaign Financing \$5.00		
23			28 USELLINGTON, FL.		Trust Fund Contribution		
Zip	Country	29 33414		m Beaul	8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Yes No		
24	25 Name and Address of Cur		30 0 0	m Dai-	10. Name and Address of New Registered Agent	3 140	
od No-							
YOUNG, ALAN							
YOUNG, ALAN 2215 AMESBURK CT. Ames kury WELLINGTON FL 33414				82 Street	Street Address (P.O. Box Number is Not Acceptable)		
		v		83			
				84 City	FL 85 Zip C	Code	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title II applicable (NOTE Registered Agent algorature required when reinstating) DATE							
12.		AND DIRECTORS	13.	y Agent and later	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 12	
TITLE	Р	DELETE	1.1 TO	LE	☐ Change	Addition	
NAME	YOUNG, ALAN	.	1.2 NA	ME			
STREET ADDRESS		asserburg.	1.3 ST	REET ADDRESS	2215 AMESBURY CT. WELLINGTON, FL. 33414		
CITY-ST-ZIP	WELLINGTON FL 33414		1.4 00	Y-ST-ZIP	WELLINGTON, FL. 33414		
TITLE		☐ DELETE	2.1 11	LE	Change ·	Addition	
NAME			22 NA	ME			
STREET ADDRESS			2.3 ST	REET ADDRESS	1		
CITY-ST-ZIP				TY-ST-ZIP	<u> </u>		
TITLE	DELETE 3.1		3.1 Til		L. Change	Addition	
NAME			3.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		DELETE		TY-ST-ZIP	Change	Addition	
TITLE			4.1 TO 4.2 N		L.J Change		
NAME Street address				rme Reet address			
CITY-ST-ZIP				Y-ST-ZIP		-	
TITLE		☐ DELETE	5.1 Til	~~	Change	Addition	
NAME			5.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
TITLE		DELETE	6.1 TIT		Change	Addition	
NAME			6.2 NA	ME			
STREET ADDRESS	•		6.3 ST	REET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP			
14 I hereby o	pertity that the information supplier	d with this filing does not qualify.	for the exe	motion state	ted in Section 119.07(3)(i). Florida Statutes. I further certify that the	information	

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 1 in 0.7(3)(i), richas Statutes. I further certify that the information indicated on this annual report or suppliemental 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: