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

Mailing Address

US

16104 JETSON DRIVE

SPRINGHILL FL 34610

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000049842

A & E INDUSTRIES, INC.

Principal Place of Business

16104 JETSON DRIVE

SPRINGHILL FL 34610

06/10/1996 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-3383643 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt, #, etc. 5. Certifcate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation owes the current year Intangible Country Zip Zip Yes Yes □No Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SHAW, ANDRES J Street Address (P.O. Box Number is Not Acceptable) 82 16104 JETSON DRIVE SPRINGHILL FL 34610 83 Zip Code 84 85 City 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 if applicable. (NOTE: Registered Agent signature requi ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. ☐ Change DELETE 1.1 TITLE TITLE **DPVS** 12 NAME SHAW, ANDREW J. NAME 1.3 STREET ADDRESS 16104 JETSON DR STREET ADDRESS SPRING HILL FL 14 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADORESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition [] Change [] DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 6.1 TITLE TITLE 6.2 NAME

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:

NAME

STREET ADDRESS

NO TYPED OR RINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew Shaw

6.3 STREET ADDRESS

64 CITY-ST-ZIP

352-857-0054

FILED Mar 11, 1999 8:00 am

Secretary of State

03-11-1999 90160 020 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

CR2E034 (11/98)