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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 25 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000050195 (2)

CHOICE TOOL & MOLD, INC.

Principal Place of Business Mailing Address										
9091 180TH AV LARGO FL 3484		9091 130TH AVE. NORTH LARGO FL 33773-1404	9091 130TH AVE. NORTH LARGO FL 33773-1404							
						3. Date Incorporated or Qualified 06/10/1996	3a. Date	of Last R	leport	
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ar	oplied For	
21	···	26	\$			59-3385008 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired Security Securi				
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contribution				
Ζip			-	ntry		8. This corporation has liability for intengible tax under s. 199.03			. 199.032,	
24	25	25 29 30 30 9, Name and Address of Current Registered Agent			Florida Statutes Yes No					
		ent Registered Agent		201		10. Name and Address of New Reg	Istered Aç	jent		
MOREY, LARRY R				81 Nar	16					
	BELLEVUE BLVD.		82 Street Ad		eet Addre	ess (P.O. Box Number is Not Acceptable	e)			
CLEA	ARWATER FL 34616									
				83						
				84 City	,			85 Zip i	Code	
				'			PL			
11. Pursuant office or i	to the provisions of Sections 607.05 registered agent, or both, in the Stat	:02 and 607.1508, Florida Statu e of Florida, Such change was	ites, the al	pove-nam d by the d	ied corpo	pration submits this statement for the pu	rpose of c	hanging it	s registered	
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Stat	utes.	o por an	on's board of directors. I hereby accept	the appoin	timent as	registered	
SIGNATURE										
12.	Signature, typed or printed name of registered as	gent and little if applicable (NO ND DIRECTORS	11. Hegistered	Agent signa	ature require	d when renstating)	DATE -	NDEOTOE		
TITLE	D	DELETE	1.1 Tr	115	Τ.	ADDITIONS/CHANGES TO OFFICE		Change	Addition	
NAME .	MOREY, LARRY R		1.2 N/		P	Towns D	1-3	D Change	☐ Vocition	
STREET ADDRESS	1384 BELLEVUE BLVD.		1.3 STR			Morey, Larry R.				
CITY-ST-ZIP	CLEARWATER FL 34616					1384 Bellevue Blvd. Clearwater, FL 34616				
TITLE	D	DELETE	2.1 TI	IY-S1-ZIP	1	learwater, FL 340		Change	Addition	
NAME	MOREY, CAROL L	Land Port	2.2 NA		T	wor Caral I	7	onango		
STREET ADDRESS	1384 BELLEVUE BLVD.			REET ADDRE		orey, Carol L.				
CITY-ST-ZIP	CLEARWATER FL 34816			TY-ST-ZIP		884 Bellevue Blvd.				
TITLE		DELE 1E	3.1 TI			earwater, FL 346		Change	Addition	
NAME		-	3.2 N/		V	intingo Took T	_		-X	
STREET ADDRESS				REET AOORE:		intiago, Jose I. 081 Powderhorn Dr.			}	
CITY-ST-ZIP				1Y-S1-ZIP	20	earwater, FL 346	15		ļ	
TITLE		DELETE	41][• • • • • • • • • • • • • • • • • • • •	1201	GOLFICICITY FII 340		Change	Addition	
NAME			4. 2 N	AME				-		
STREET ADDRESS			4.3 ST	REET ADDRES	SS					
CITY-ST-ZIP			4.4 CI	Y-S1-ZIP						
TITLE		DELFTE	5.1 Til					Change	Addition	
NAME			5.2 NA	Mξ				-		
STREET ADDRESS			5.3 ST	REET ADDRES	ss					
CITY-ST-ZIP			5.4 CI	Y-ST-ZIP						
TITLE		DELETE	6.1 TiT		·			Change	☐ Addition	
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 \$1	REET ADDRES	ss					
	İ				1					

14. I do 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.