

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0074

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS

FILED

99 NOV - 1 AM 11:58

SECRETARY OF STATE



REINSTATEMENT DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000091639 (0)

1. Corporation Name FASCO PRODUCTS, INC.

Principal Place of Business

6500 SARGASSO WAY JUPITER FL 33458

Mailing Address

6500 SARGASSO WAY JUPITER FL 33458

2. Principal Place of Business

21 1228-53rd St

Suite, Apt. #, etc.

City & State

23 MANGONIA PARK, FL

Zip

24 33407

Country

25 USA

2a. Mailing Address

26 1228-53rd St

Suite, Apt. #, etc.

City & State

28 MANGONIA PARK, FL

Zip

29 33407

Country

30 USA

3. Date Incorporated or Qualified

11/07/1998

4. FEI Number

59-3420281

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes

No

9. Name and Address of Current Registered Agent

FASSLER, PAUL A 6500 SARGASSO WAY JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip 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]

(NOTE: Registered Agent signature required when reinstating)

2/1/99 DATE

12. OFFICERS AND DIRECTORS

TITLE PD DELETE

NAME FASSLER, PAUL A STREET ADDRESS 6500 SARGASSO WAY CITY-ST-ZIP JUPITER FL 33458

TITLE DELETE

NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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***300.00 Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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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 changed, or on an attachment with an address.

SIGNATURE: [Signature] REQUIRED

9/11/98 561-881-8850 DATE DAYTIME PHONE #

CR2E034 (5/98)