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

**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## Sandra B. Mortham

## 1998 DOCUMENT # P96000096999 (3)

FIRELINE RESTORATION, INC.

3018 HORATIO ST.

Principal Place of Business

Mailing Address

## FILED Jan 20 1998 8:00am Secretary of State



3018 HORATIO ST. TAMPA FL 23628 - 33609 TAMPA FL <del>20020</del>- 33609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/22/1996 2. Principal Place of Business 2a, Mailing Address Applied For Not Applicable 21 26 59-3434272 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 33609 33 6 O9 25 Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MARSHALL, BRIAN 3018 HORATIO ST. 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33820- 3 3 609 83 84 City 85 33609

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 registored 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 (NOTE: flegistered Agent signature required when reinstating) OFFICERS AND DIRI CTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13, DELETE Addition TITLE 1.1 TITLE MARSHALL, BRIAN 1.2 NAME NAME 3018 HORATIO STREET STREET ADDRESS 1222 S DALE MABRY, SUITE 343 1.3 STREET ADDRESS TAMPA, FI 33609 **TAMPA FL 33629** 1.4 CRY-S1-ZIP CITY-ST-ZiF Change Addition DELFTE BITLE 2.1 TITLE NAME ROTH, RICK 2.2 NAME 3018 HORATO STREET 6137 PASADENA POINT BLVD 2.3 STREET ADDRESS STREET ADDRESS **GULFPORT FL 33707** TAMPA, F) 33609 2 4 CITY-ST-7IP CITY-ST-Z#P DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CHTY - \$1 - 7(P CITY-ST-7IP DELFTE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-S1-7IP CITY-ST-ZIP DELETE Change \_\_\_ Addition 5 1 1IILE THILE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 64 CITY- ST- ZIP

14. I heroby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 logal effect as if made under oals; 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

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