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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000102084

1. Corporation Name

ELECTRIC MACHINERY INTERNATIONAL, INC.

		A 41 A 41			
Principal Place of Business Mailing Address					,
2515 E HANNA AVE 2515 E HANNA AVE TAMPA FL 33610 TAMPA FL 33610			DO NOT WRITE IN THI	IS SPACE	
				3. Date Incorporated or Qualifed	
				12/17/1996	
0 5	- of Dusings	2a. Mailing Address	<del></del>	4. FEI Number	Applied For
	ace of Business	<u> </u>		59-2010568	Not Applicable
21	# ·	Suite, Apt. #, etc.	<del> </del>		\$8.75 Additional
Suite, Apt.	#, etc.	27		5. Certifcate of Status Desired	Fee Required
Citý & State	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be
	•	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	ntangible
24	25	29 30	7	Personal Property Tax.	ŬYes ☑No
24	9. Name and Address of Curren			10. Name and Address of New Registere	d Agent
	<u> </u>		81 Name		
· WILL	IAMSON, LEON A		B2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
2515 E HANNA AVE			82 Street Ad	idless (P.O. Box Nulliber is Not Acceptable)	
TAMPA FL 33610			83		
	•				Tag 7: Orde
			84 City	F	L 85 Zip Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	onzed by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the app	of changing its registered ointment as registered
SIGNATURE		(NOTE: Po	gistered Agent signature requ	(red when reinstation) DATE	
40	Signature, typed or printed name of registered age	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.	D OFFICERS AN	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WILLIAMSON, LEON A		1.2 NAME		
). I	2515 E HANNA AVE		1.3 STREET ADDRESS		
STREET ADDRESS	TAMPA FL 33610		1.4 CITY-ST-ZIP		
CITY-ST-ZIP	PD PD	□ DELETE	2.1 TITLE		Change Addition
NAME	SIERRA, FRANK J.		2.2 NAME	,	
	2515 E. HANNA AVENUE		2.3 STREET ADDRESS		
STREET ADDRESS	TAMPA FL		2.4 CITY-ST-ZIP		
CITY-ST-ZIP	_VD	☐ DELETE	3.1 TITLE		Change Addition
NAME	DAVIDSON, JAMES R.		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		3.4. CITY-ST-ZIP	•	
TITLE	ST	☐ DELETE	4.1 TITLE		Change Addition
NAME	WALKER, FRANKLIN	_	4.2 NAME		
STREET ADDRESS	2515 E. HANNA AVENUE		4.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	JURADO JAIME		5.2 NAME		

14. I hereby certify that the information supplied with this time 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 supplier ental any fair 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 of truetee endowered to execute his 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. CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

2515 E. HANNA AVENUE

TAMPA FL

Pranklingwalker Secretary UIR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/15/99

(813)238-5010

☐ Change

Addition

Daytime Phone #