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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P970( INDUSTRIES, INC.	00000021 (	(O)					
Principal Place	of Business	Mailing Address				4 somitage sem samt eddis dater mayer dater dater dater dater dater garin 1000 1100 1000		
151 CRANDON	N BLVD	151 CRANDON BLVD						
#328 KEY BISCAYN	E FL 33149	#328 KEY BISCAYNE FL 33149				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 12/17/1996		
¬ '	ace of Business	2a. Mailing Address	, Mailing Address			4. FEI Number Applied For		
Suite, Apt. 4	# etc	26	Suite Ant # etc			65-0728510 Not Applicable \$8.75 Additional		
22	1, <del>4</del> 10.	27				5. Certificate of Status Desired Fee Required		
City & State	)	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip 29	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes X No		
	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Registered Agent		
#32 KE)	28 Y BISCAYNE FL 33149		82 Street A			Address (P.O. Box Number is Not Acceptable)		
agent. I ar SIGNATURE	o the provisions of Sections 607.0 agistered agent, or both, in the Sta familiar with, and accept the oblination of the provision of the section of the se	ligations of, Section 607.050	05, Florida Sta	tutes	<b>i</b> .	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered		
12. OFFICERS AND DIRECTORS					<u>.</u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE 11		TLE		P Change S Addition		
NAME	ARNOLD, WENDALL	<b>.</b>		1.2 NAME		CAROLYN ARNOLD		
STREET ADDRESS	MEN BIOCAVNE EL ANA 40					Isi Crandon Blvd. # 328		
CITY-ST-ZIP TITLE	ACT DISCATINE PL 33149			CITY-ST-ZIP Ke		Key Biscayne, FL 33149 Change Kl Addition		
NAME		D DEED!	2.1 H			· <b></b>		
STREET ADDRESS					ADDRESS	Susanna L. Raffey 5020 206th Terr. N.		
CITY-ST-ZIP					iT-ZIP	Loxahatchee, FL 33470		
TITLE				3.1 TITLE		Change Addition		
NAME			3 2 N	AME				
STREET ADDRESS			3.3 5	TREET	address			
CITY-ST-ZIP					T-ZIP			
TITLE		☐ DELETI	E 4.1 TI	TLE .		Change Addition		

6.4 CITY-ST-ZIP CITY-ST-ZIP 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.

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE 52 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

DELETE

DELETE

Change

Change

Addition

Addition

**FILED** 

Jan 23 1998 8:00am

Secretary of State