## 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

DOCUMENT # P97000015561 (8)

**HOLT CUSTOM ENCLOSURES INC** 

## **FILED** May 01 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			1 (63)(63) (63 (44)( 50)( 50)( 50)( 50)( 53)( 53)( 130) 51(6) 51(6) 51(6) 51(6)	101
1072 OLYMPI VENICE FL 34		1072 OLYMPIA ROAD VENICE FL 34290				
ACUMOS LF 24	1290	VENICE FL 34293			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					02/11/1997	
<b>—</b>	lace of Business	2a. Mailing Address	000	s Ave	4. FEI Number Applied F	
21 (이 년 Suite, Apt.	1 Cypress AM	2 26 \( \text{\text{Suite, Apt. #, etc.}} \)	7,0	2 HAC		
22 3	<b>_</b>	27			5. Certificate of Status Desired S8.75 Addition	1
City & State		City & State			6. Election Campaign Financing \$5.00 May B	4
23 Ve	Venice, FL 28 Venice, F			•	Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	•	8. This corporation owes or has paid the current year Intangible	Э
24 342			30 <u>V</u>	<u> 517</u>	Personal Property Tax due June 30. 🔀 Yes 🗌 No	
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Registered Agent	
	DE, PERILYNN		ľ	i iyame		
1072 OLYMPIA ROAD				82 Street Address (P.O. Box Number is Not Acceptable)		
VENICE FL 34293				3		
				<u> </u>		
			8	4 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	s, the abo	ve-named corp	poration submits this statement for the purpose of changing its regis	tered
office or r	<b>egistered age</b> nt, or both, in the State m <b>fam</b> ifiar with, and accept the obliga	of Florida. Such change was au itions of, Section 607.0505, Flor	uthorized i ida Statut	oy the corporat es:	tion's board of directors. I hereby accept the appointment as registe	red
SIGNATURE	_					}
	Signature, typed or printed riame of registered ages			gent signature requir	red when reinstaling) DATE	
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:	ddition
NAME	WADE, PERILYNN	- Officer	1.2 NAM	- 1		1
STREET ADDRESS	1072 OLYMPIA ROAD		1	ET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293		1.4 CITY			
TITLE	D				Change A	ddition
NAME	HOLT, BRUCE		2.2 NAM	:		
STREET ADDRESS	1072 OLYMPIA ROAD		2.3 STRE	et address		}
CITY-ST-ZIP	VENICE FL 34293		2. 4 CITY	-ST-ZIP		
TITLE		DELETE	a.1 TITLE		[_] Change [_] A	ddition
NAME			3.2 NAM			[
STREET ADORESS				E1 ADDRESS		j
CITY-ST-ZIP		DELETE	3.4. CITY 4.1 TITLE		☐ Change ☐ A	ddition
NAME		[ otter	4.1 IIILE	[	En onarige CT W	3111011
STREET ADDRESS				ET ADDRESS		ļ
CITY-ST-ZIP			4.4 CITY			ł
TITLE	<del></del>	DELETE	5.1 TITLE		Change A	ddition
NAME			5.2 NAM			
STREET ADDRESS			5.3 STRE	et address		
CITY-ST-ZIP			5.4 CiTY	ST-ZIP		
THILE		DELETE	6.1 TITLE		Change A	ddition
NAME			6.2 NAMI	[		1
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
14. I hereby o	ertify that the information supplied wi	th this filing does not qualify for	the exem	ption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the inform-	ation 1

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.

SIGNATURE:

4-23-98

493-4970