## 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 # P97000044504 (3)

ENGINE LAB OF ORLANDO, INC.

## FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1448 W ANDERSON ST 1446 W ANDERSON ST ORLANDO FL 32805 ORLANDO FL 32805 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2362845 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. XX Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LANTRY, JOHN P 1446 W ANDERSON ST 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32805 83 84 City Zip Code 1502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered late of liorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered oligistics of, Section 607.0505, Florida Statutes. 11. Pursua gistered agent, or both, in the State of familiar with, and accept the oblig office. P. JOHN LHntRY SIGNATURE Signature, typed or prieted name of region red agent and till (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE LANTRY, JOHN P 1.2 NAME NAME 1446 W ANDERSON ST STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32805 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CI1Y-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET AUDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 11116 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4,4 CITY - ST - ZIP DELETE Addition TITLE 51 JULE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-S1-ZIP 14. Thereby certify that the information supplied with this filling 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 first 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 trusted 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.