

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

FILED

Apr 15 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000052345 (0)**

1. Corporation Name

**AMERICAN SPECIALTY EQUIPMENT CO.**

Principal Place of Business

Mailing Address

734 N. 3RD ST. #418  
LEESBURG FL 34748

734 N. 3RD ST. #418  
LEESBURG FL 34748

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/12/1997

4. FEI Number

59-3454941

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 734 N. 3rd St.

26 734 N. 3rd St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste. #418B

27 Ste. #418B

City & State

City & State

23 Leesburg, FL

28 Leesburg, FL

Zip

Country

Zip

Country

24 34748

25 USA

29 34748

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

81 Name

Richard W. Blount

82 Street Address (P.O. Box Number is Not Acceptable)

83 734 N. 3rd St. Ste. 418B

84 City

Leesburg,

FL

85 Zip Code

34748

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 registered 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

*Richard W. Blount*

Richard W. Blount

04/07/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	BLOUNT, RICHARD W	
STREET ADDRESS	734 N. 3RD ST. #418	
CITY-ST-ZIP	LEESBURG FL 34748	

1.1 TITLE	V/C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Richard W. Blount	
1.3 STREET ADDRESS	734 N. 3rd St. Ste. #418B	
1.4 CITY-ST-ZIP	Leesburg, FL 34748	<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	BLOUNT, MICHAEL R	
STREET ADDRESS	734 N. 3RD ST. #418	
CITY-ST-ZIP	LEESBURG FL 34748	

TITLE	D	<input type="checkbox"/> DELETE
NAME	BECERRA-BLOUNT, CINDY E	
STREET ADDRESS	734 N. 3RD ST. #418	
CITY-ST-ZIP	LEESBURG FL 34748	

3.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Cindy E. Becerra-Blount	
3.3 STREET ADDRESS	734 N. 3rd St. Ste. #418B	
3.4 CITY-ST-ZIP	Leesburg, FL 34748	<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

4.1 TITLE		
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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.

SIGNATURE:

*Cindy E. Becerra-Blount*

04/07/98 (352)365-6226

CR2E034 (10/97)