## 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 # P97000063241 (8)

**AUTOMATION FOR INDUSTRY, INC.** 

Principal Place of Business	Mailing Address			
2147-D PORTER LAKE DRIVE	2147-D PORTER LAKE DRIVE			
SARASOTA FL 34240	SARASOTA FL 34240			

## **FILED** Mar 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
2147-D PORTER LAKE DRIVE 2147-D PORTER LAKE DRIVE			IVE					
SARASOTA FL 34240		SARASOTA FL 34240				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
						07/21/1997		
2. Principal F	Place of Business	2a. Mading Actinger			<del></del>	4. FEI Number Applied For		
21		26 PO Box	331	9		104-2847577   Not Applicable		
Suite, Apt.	W. etc.	Suite, Apt. #, etc.		1-		SR 75 Additional		
27						5. Certificate of Status Desired Fee Required		
City & Stat	te	City & Mate			<del></del>	6. Election Campaign Financing \$5.00 May Be		
23		28 dar asol	0_	F	_	Trust Fund Contribution Added to Fees		
Zip	Country	7	Countr	y _		8. This corporation owes or has paid the current year Intangible		
24	25	29 34230	30	LS	$\mathcal{A}$	Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curren	t Registered Agent			<del>,                                    </del>	10, Name and Address of New Registered Agent		
W	OOSTER, DENISE		81	Na	ame			
	7184 N. SERENOA DRIVE				00 0 Add (DO D. M (Add )			
SARASOTA FL 34241				82 Street Address (P.O. Box Number is Not Acceptable)				
~~	TERRORINI E CILTI		83	1				
ļ				1_				
			84	l] Ci	ly	FL 85 Zip Code		
11 Purcuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statuto	s the above	/e-ne	med corr			
office or	registered agent, or both, in the State	of Florida. Such change was at	uthorized b	y the	corporat	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered		
	am ramiliar with, and accept the obliga	aligns of, Section 607.0505, Flor	rida Statute	)S.				
SIGNATURE	Signate, typed or printed name of registered age	1000 Tec	. Danistavad An	ont sin	not up regula	ired when reinstating) DATE		
12.	OFFICERS AND		13.	Join, any	nata-a regar	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	1 D	DELETE	1.1 TITLE			☐ Change ☐ Addition		
NAME	WOOSTER, JACK	_	1.2 NAME			_ ·		
STREET ADORESS	7184 N. SERENOA DRIVE		1.3 STREE		3E CC			
CITY-ST-ZIP	SARASOTA FL 34241							
TITLE	D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			Change		
NAME	WOOSTER, DENISE		2.2 NAME		1			
STREET ADDRESS	7184 N. SERENOA DRIVE		2.3 STREE		3500			
	SARASOTA FL 34241				1			
CITY-ST-ZIP TITLE	SANASOIA FL 34241	☐ DELETE	2.4 CITY-ST-2 3.1 TITLE			☐ Change ☐ Addition		
NAME	t S		3.2 NAME			Change Roomon		
	ļ							
STREET ADORESS	<u> </u>		3.3 STREE		1			
CITY-ST-ZIP		Deserve	3.4. CITY-ST-		<u> </u>	Change Addition		
TITLE			4.1 TITLE	_		Change Addition		
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP	ļ	T no rec	4.4 CITY-	ST-ZIP		The same of the sa		
TITLE		☐ DELETE	5.4 TITLE			☐ Change ☐ Addillon		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADOR	tess			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE	ŀ	☐ DELETE	6.1 TITLE			Change Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDR	KESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	,			
	certify that the information supplied w	ith this filing does not qualify for				Section 119 07(3)(i) Florida Statutes I further certify that the information		

indicated on this annual roport or supplemental annual roport is true and accurate and that my signature shall have the same legal effect as if made under outh; 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 changing, or on an attachment with an address.

2/24/98

941-377-516