SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 **DOCUMENT #** P970000,65754 (8)

LANTANA PROCESS LABORATORY, INC.

Principal Place of Business

Mailing Address

## Jul 13 1998 8:00am Secretary of State



635 F GATOR DR LANTANA FL 33462		635 F GATOR DR LANTANA FL 33462		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/30/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
27 635 F GATOR DRIVE 26 SAME			As Above		650774554	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		_	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	TANA FLORIDA	City & State	28		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
1-1 30 10 73 1-1		<u> </u>	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent						
WASHBURN, DAVID				81 Name		
635 F GATOR DR				82 Street Address (P.O. Box Number is Not Acceptable)		
LANTANA FL 33462			}	83		
	_					
				84 City	F	85 Zip Code
11. Pursuent 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 for 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, am amiliar with, and apopt the obligations of, section 607.0505. Florida Statutes.						
SIGNATURE NAVY VIAMON DAVID WASHBURN 15196						
12	Signature, typed or printed name of registered agent's OFFICERS AND		TE Registere	d Agent signature re-	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.	PRESIDENT	DELETE	1.1 TITL	Ε	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	MAUD WASHBURN	1.2 N				C Cliange Magning
STREET ADDRESS 635 F GATOR DYL				EET ADDRESS		
CITY-ST-ZIP	CITY-ST-ZIP LANTANA, FL 33962			/-ST-ZIP		
TITLE	VICE PRESIDENT	DELETE	21 TITL			Change Addition
NAME	ROBERT LEVINE		2.2 NAN	AE		
STREET ADDRESS	ADDRESS HOL NE 35 ST			EET ADDRESS		
CITY-ST-ZIP	Tree		_	(-ST-ZIP		
1	TREASURER	DELETE	3.1 T(T)			Change Addition
NAME	DEAN PILLING 1126 SW 2157 ST		3.2 NAN	-		
STREET ADDRESS	1 2 1/2 1/2 20 1/2/			EETADDRESS		
CITY-ST-ZIP	SECHLETARY	DELETE	3.4 CIT	r-ST-ZIP		Change Addition
NAME	WHITHIR PILLING	[_] DETE IC	4.2 NAN			L_f Charige [] Addition
STREET ADDRESS	11265W 2157 SI			EET ADDRESS		
CITY-ST-ZIP	10 0 61 2348/2			(-ST-ZIP		
TITLE		DELETE	5.1 TITL			Change Addition
NAME		<del></del>	5.2 NAM	1E		
STREET ADORESS			5.3 STR	EETADDRESS		
CITY-ST-ZIP			_	r-ST-ZIP		
TITLE		DELETE	6.1 TITL	·	200002555	- Change
NAME			6.2 NAA		2000025881 -07/14/9801042	-D46 V M
STREET ADDRESS				EET ADDRESS	***150.00	JAMI
CITY-ST-ZIP			6.4 CIT	/-ST-ZIP	and the state of t	• • • • • • • • • • • • • • • • • • • •

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 shaplemental africal 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 charged or the an attachment with an address.

7/0/98

541-533-8006