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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000075587

Corporation Name

AMERICAN SLICK-RAIL CONVEYOR, INC.

AMEINO	ar delon three don't elon				
Principal Place	e of Business	Mailing Address			•
4406 S FLORIDA AVD 4406 S FLORIDA AV					
SUITE 24 SUITE 24				DO NOT WRITE IN THIS	SPACE
LAKELAND FL 33813 LAKELAND FL 33813 LIS US				STACE	
US		03		3. Date Incorporated or Qualifed 08/22/1997	
Principal Place of Business     2a. Mailing Address		2a. Mailing Address		4. FEI Number	Applied For
21 26				59-3465546	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
		27	<del></del>	<u> </u>	
City & State	е .	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28	0	Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes the current year Int	angjble ☑Yes □No
24	25	29 30	0	Personal Property Tax.  10. Name and Address of New Registered	
<u> </u>	9. Name and Address of Current	Kegistered Agent	81 Name	TO. Hante and Address of them Registered	, .g
SERI	RANO, FRANCISCO J				
4406 S FLORIDA AV		82 Street Addre	ess (P.O. Box Number is Not Acceptable)		
SUITE 24			83		
LAKELAND FL 33813		83	·	1	
LANC	ELAND I C 330 I3		84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes					changing its registered
office or n	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligation	of Florida. Such change was autf	norized by the corboratio	on's board of directors. I hereby accept the appo	intment as registered
SIGNATURE	Signature, typed or printed name of registered agent	INOTE: D	egistered Agent signature required	d when reinstation) DATE	<del></del>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	D .	DELETE	1.1 TITLE	, ,	Change Addition
NAME	SERRANO, NELSON I		1.2 NAME	,	
	4406 S FLORIDA AV, STE 24		1.3 STREET ADDRESS		
STREET ADDRESS	LAKELAND FL 33813		1.4 CITY-ST-ZIP		İ
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
	SERRANO, FRANCISCO J	· —	2.2 NAME		1
NAME	AAAA O ELODIDA AVE OTE OL		2.3 STREET ADDRESS		}
STREET ADDRESS	-LAKELAND.FL 33813				
CITY-ST-ZIP	-CARLEMID.FL 30010	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	The same of the sa	☐ Change ☐ Addition
TITLE		- Defection	3.2 NAME		
NAME				•	
STREET ADDRESS	) ·		3.3 STREET ADDRESS	•	ļ
CITY-ST-ZIP		□ DELETE	3.4. CITY-ST-ZIP	<u> </u>	☐ Change ☐ Addition
TITLE		□ nere (€	4.1 TITLE	•	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	·	,
CITY-ST-ZIP			4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE	· · ·	☐ Change ☐ Addition
NAME			5.2 NAME	<i>₹</i> ;	
STREET ADDRESS					1
1			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		CT Observe CT 6 July
1		☐ DELETE			☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

STREET ADDRESS

CALLEGE SECTION OF THE PRANCISCO J. SERRAND 4-13-99

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

-- CR2E034 (11/98)

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90110 022 \*\*\*150.00