SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000100052

K-TRON OF FLORIDA, INC.

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90012 014 ***550.00



								1811: 19 11) 68 11 1810 1	. (1 1) (11) (11)	. 66 16) [2] 8 [
Principal Place of Business Mailing Address									,		
1130 SO. POWERLINE RDSTE.103 ** 1130 SO. POWERLINE RDST											
DEERFIELD BEACH FL 33442		DEERFIE	DEERFIELD BEACH FL 33442				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or				
							11/24/1998				
2 Principal Pl	ace of Business	2a Mailir	ng Address			·	4. FEI Number			Applied F	or
a. Timoparti	~ ~ _	26					-65.089	3323	=	Not Appli	
Suite, Apt. i	# etc.		Suite, Apt. #, etc.						\$8.7	5 Addition	nal
22	, , , ,	27	¬ '''				5. Certificate of Status I)esired \square		e Required	
City & State)		City & State				6. Election Campaign Financing \$5.00 May Be				
:3		28	¬ '				Trust Fund Contributi			led to Fees	
Zip	Country	Zip		Cou	intry		8. This corporation owe	s the current year	r		
24	25	29		30		-	Intangible Personal P	roperty.	Yes	∐_ No	
	9. Name and Address of Currer	nt Registered	Agent				10. Name and Address	of New Register	red Agent		
			<u> </u>		81	Name					ł
	rdoch, robert e esq.					Street Addr	Idress (P.O. Box Number is Not Acceptable)				
790	EAST BROWARD BLVD., STE. 40	0				Street Address (F.O. Dox Mulliber is Not Acceptable					
FT.	LAUDERDALE FL 33301										
									Toel	Zin Cado	
					84	City		·	=L ⁸⁵ ²	Zip Code	- 1
SIGNATURE .	Signature, typed or printed name of registered age			OTE: Registe	red Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGE	S TO OFFICERS		CTORS IN	12
TITLE	D OFFICERS A	ID DINECTOR	DELETE	1.1 (1	TLF		ADDITIONOLUTION	<u> </u>	Chan	<u> </u>	ddition
NAME	PASQUARELLI, FRANCO		DECEIL	1.2 N						ъ- <u> </u>	
STREET ADDRESS	1130 SO. POWERLINE RD.,ST	F 103		I .		ADDRESS					
,	DEERFIELD BEACH FL 33442										į į
TITLE	DELETE DELETE		_	1.4 CITY-ST-ZIP 2.1 TITLE				Chan	ne T A	ddition	
NAME			[_] DELETE	2.2 N						.، <u>ب</u>	
STREET ADDRESS			- •	~ ~		ADDRESS	• *			~	
CITY-ST-ZIP					2.4 CITY-ST-ZIP						Į
TITLE			DELETE	3.1 TI					Chan	ige A	ddition
NAME	1			3.2 N						"	
STREET ADDRESS	Ša v			N. C.		ADDRESS					1
CITY-ST-ZIP	C				TY-ST-	i					_ }
TITLE			DELETE	4.1 TI					Chan	ige A	ddition
NAME				4.2 N	AME				_		j
STREET ADDRESS				4.3 ST	REETA	ADDRESS					-
CITY-ST-ZIP				4.4 C	TY-ST-2	ZIP.					
TITLE			DELETE	5.1 TI					Chan	nge A	Addition
NAME .				5.2 N	AME	1				- —	
STREET ADDRESS				5.3 ST	REET A	ADORESS					- 1
CITY-ST-ZIP	Section 18 Section 18				TY-ST-						
TITLE	1.47		DELETE	6.1 Ti					Char	ige A	ddition
NAME	•			6.2 N						· — ·	
STREET ADDRESS		,				ADDRESS					į
CITY-ST-ZIP	/	1			TY-ST-	ļ					-
	ertify that the information supplied with	n this filing doe	s not qualify for t				tion 119.07(3)(i), Florida Sta	tutes. I further cer	tify that the i	nformation	

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 a statechment with an address.

SIGNATURE:

IGNATURE English Grandelli 6/30/99

CR2E034 (5/99