**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

DOCUMENT # **S11880** **(9)**

1995 MAY -1 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

**TOOLTREND, INC.**

600001492906
-05/18/95--01011--014
****225.00 ****225.00
DO NOT WRITE IN THIS SPACE

| Principal Place of Business | Mailing Address |
|---|---|
| 5425 BEAUMONT CENTER BLVD. STE 900<br>TAMPA FL 33634 | 5425 BEAUMONT CENTER BLVD. STE 900<br>TAMPA FL 33634 |

3. Date Incorporated or Qualified: **11/07/1990**

3a. Date of Last Report: **04/13/1994**

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 310 MEARS BLVD. | 26 310 MEARS BLVD |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 OLDSMAR, FL. | City & State 28 OLDSMAR, FL. |
| Zip 24 34677 Country 25 U.S.A. | Zip 29 34677 Country 30 U.S.A. |

4. FEI Number: **59-3037514** ☐ 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

9. The corporation has taxable, for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

| 81 Name | VENDITTO, CARLO M<br>2964 CIELO CIRCLE S<br>CLEARWATER FL 34619 |
|---|---|
| 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | |
| 84 City | FL 85 Zip Code |

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | SP | 1.1 TITLE | C.E.O ☑ Change ☐ Addition |
| NAME | VENDITTO, CARLO M. | 1.2 NAME | CARLO VENDITTO M. |
| STREET ADDRESS | 2964 CIELO CIRCLE S. | 1.3 STREET ADDRESS | 124 DEVON DR. |
| CITY ST ZIP | CLEARWATER FL | 1.4 CITY ST ZIP | CLEARWATER FL 34630 |
| TITLE | V | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | PADDOCK, CLIFF | 2.2 NAME | |
| STREET ADDRESS | 3552 LAKE HIGHLAND DR. | 2.3 STREET ADDRESS | |
| CITY ST ZIP | PALM HARBOR FL | 2.4 CITY ST ZIP | |
| TITLE | | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY ST ZIP | | 3.4 CITY ST ZIP | |
| TITLE | | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY ST ZIP | | 4.4 CITY ST ZIP | |
| TITLE | | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY ST ZIP | | 5.4 CITY ST ZIP | |
| TITLE | | 6.1 TITLE | SVP ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | 3-1-95 |
| CITY ST ZIP | | 6.4 CITY ST ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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:** _____ 3-1-95 (813)891-0160

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0301922 CP