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 #

(3)

FILED Jan 15 1998 8:00am Secretary of State

1. Corporation		· · ·		
) Flori	DA FOAM PRODUCTS, INC.	•		
· ·	ce of Business	Mailing Address		•
6363-1 GREENLAND ROAD JACKSONVILLE FL 34474 JACKSONVILLE FL 32258				
US	TE LE 24414	US	:00	DO NOT WRITE IN THIS SPACE
_				3. Date Incorporated or Qualified
				12/03/1990
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-3061237 Not Applicable
Suite, Apt.	#, etc,	Sulte, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional
22				Fee Required
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
·- ·.I	9. Name and Address of Curren			10. Name and Address of New Registered Agent
C	LAUSS, HARRY J.		81 Name	
63	363 1 GREENLAND ROAD		82 Street A	ddress (P.O. Box Number is Not Acceptable)
J/	ACKSONVILLE FL 32258			adiate (files and territorial for the files and the files
			83	
			84 City	■ 85 Zip Code
				FL S Z COCK
11. Pursuant office or	to the provisions of Sections 607,050; registered agent, or both, in the State	2 and 607.1508, Florida Stati of Florida. Such chance was	stes, the above-named of authorized by the corpo	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, F	Torida Statutes.	
SIGNATURE				
12.	Signature, typed or printed name of registered age OFFICERS ANI		OTE: Registered Agent signature re 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CLAUSS, HARRY J.		1,2 NAME	_ • _
STREET ADDRESS	6363-1 GREENLAND ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - ST - ZIP	
TITLE	S	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	CLAUSS, LORRAINE		2.2 NAME	
STREET ADDRESS	6363-1 GREENLAND ROAD		2.3 STREET ADDRESS	
CITY - ST - ZIP	JACKSONVILLE FL		2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME	1		4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>	T I NOTICE OF	4.4 CITY-ST-ZIP	T Other T Addition
TITLE		L DELETE	S.1 TITLE	L_I Change L_I Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	 	DELETE	5.4 CITY - ST - ZIP	Change Addition
TITLE		ריו הברבוב	6.1 TITLE	i change Li Addition
NAME CYDOOT ADDRESS			6.2 NAME	
STREET ADDRESS	}		6.3 STREET ADDRESS	
CITY-ST-ZIP	1		6.4 CITY - ST - ZIP	in Section 119 07/3Vi) Florida Statutes 1 further certify that the information

indicated on this annual report or supplied with any fitting does not quality 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 adactment with an address.

SIGNATURE: