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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

S18863

(8)

CECH BROTHERS, INC.

Mailing Address

FILED Feb 02 1998 8:00am Secretary of State



Principal Place of Business 1833 MINNESOTA AVE. 1833 MINNESOTA AVE. WINTER PARK FL 32789 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-3042595 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SEVCECH, RICHARD L. 1633 MINNESOTA AVE 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 63 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE ☐ DELETE 1.3 TITLE Change Addition SEVCECH, RICHARD L. NAME 1.2 NAME 138 AZELEA RD STREET ADDRESS 13 STREET ADDRESS DEBARY FL CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE Change Addition 2.1 TITLE SEVCECH, JANICE H. NAME 2.2 NAME 138 AZELEA RD STREET ADDRESS 2.3 STREET ADDRESS DEBARY FL CITY-ST-ZIP 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 __ DELET**e** Change 4.1 TITLE ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP ITLE DELETE Change **61 TITLE** Addition ME 6.2 NAME --- RESS 6.3 STREET ADDRESS 1-ST-ZIP 6.4 CITY - \$1 - ZIP

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 hustee 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.