


APPROVED

FILED

Aug 28 1997 8:00am  
Secretary of State

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # V07221 (7)**

1. Corporation Name  
**LABB INDUSTRIES, INC.**



Principal Place of Business <b>3902 DUNLEER COURT TALLAHASSEE FL 32308</b>	Mailing Address <b>3902 DUNLEER COURT TALLAHASSEE FL 32308</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>01/16/1992</b>	3a. Date of Last Report <b>03/06/1996</b>
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number <b>59-3107168</b>	Applied For Not Applicable
23. Zip	25. Country	29. Zip	30. Country	6. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**RUSHING, B. ROGER  
3902 DUNLEER COURT  
TALLAHASSEE FL 32308**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	<b>400002281664-5</b>
83.	<b>-08/29/97--01114--003</b>
84. City	<b>****165.00 FL ****165.00</b>

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

TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>RUSHING, B. ROGER</b>	
STREET ADDRESS	<b>3902 DUNLEER COURT</b>	
CITY-ST-ZIP	<b>TALLAHASSEE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>RUSHING, TALLIE P.</b>	
STREET ADDRESS	<b>3902 DUNLEER COURT</b>	
CITY-ST-ZIP	<b>TALLAHASSEE FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>RUSHING, TIMOTHY ROGER</b>	
STREET ADDRESS	<b>727 GLENDALE AVE</b>	
CITY-ST-ZIP	<b>NAPLES FL</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>THALER, KIRA RUSHING</b>	
STREET ADDRESS	<b>4111 WATERFORD CIRCLE</b>	
CITY-ST-ZIP	<b>LOUISEVILLE KY</b>	
TITLE	<b>D</b>	<input type="checkbox"/> DELETE
NAME	<b>RUSHING, ASHLEY</b>	
STREET ADDRESS	<b>3902 DUNLEER CT</b>	
CITY-ST-ZIP	<b>TALLAHASSEE FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PRESIDENT / DIRECTOR</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>RUSHING, B. ROGER</b>	
1.3 STREET ADDRESS	<b>3902 DUNLEER CT.</b>	
1.4 CITY-ST-ZIP	<b>TALLAHASSEE, FL 32308</b>	
2.1 TITLE	<b>VICE PRESIDENT, Secy / DIRECTOR</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>RUSHING, TALLIE P.</b>	
2.3 STREET ADDRESS	<b>3902 DUNLEER CT. #</b>	
2.4 CITY-ST-ZIP	<b>TALLAHASSEE, FL 32308</b>	
3.1 TITLE	<b>DIRECTOR</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>RUSHING, TIMOTHY ROGER</b>	
3.3 STREET ADDRESS	<b>3059 ESTEY AVENUE</b>	
3.4 CITY-ST-ZIP	<b>NAPLES, FL 33942</b>	
4.1 TITLE	<b>DIRECTOR</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	<b>THALER, KIRA RUSHING</b>	
4.3 STREET ADDRESS	<b>2102 GOLDSMITH LANE</b>	
4.4 CITY-ST-ZIP	<b>LOUISVILLE, KY 40218</b>	
5.1 TITLE	<b>DIRECTOR</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>RUSHING, ASHLEY</b>	
5.3 STREET ADDRESS	<b>3902 DUNLEER CT.</b>	
5.4 CITY-ST-ZIP	<b>TALLAHASSEE, FL 32308</b>	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 or changed or on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E034 (4/97)

1580  
8/28/97

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# ***LABB Industries, Inc.***

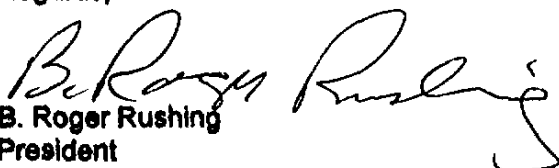
3902 Dunbar Court  
Tallahassee, FL 32308  
USA

Telephone (904)688-5222

August 21, 1997

Please be aware that the first notice of the corporate filing form was lost in the mail. I spoke with your office this week and was told to file again with this form and pay the original fee of \$165.00. Thank you for your attention to this special situation.

Regards,

  
B. Roger Rushing  
President