## 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.)

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PROFIT
CORPORATION
ANNUAL REPORT
1997

Principal Place of Business



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V22302

(6)

Mailing Address

DILLON & DILLON MACHINING, INC.

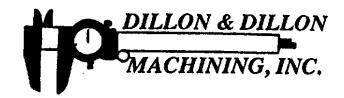
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2311-A 63RD AVE E 8-4	P.O. BOX 1512 B-4	B-4				
BRADENTON FL 34203		ENGLEWOOD FL 34295-1512		DO NOT WRITE IN THIS SPACE		
US	U\$		<ol> <li>Date Incorporated or Qualified</li> <li>03/18/1992</li> </ol>	<b>3a.</b> Date of Last Report <b>04/16/1996</b>		
2. Principal Place of Business	28. Mailing Address	ADINO AVE	4. FEI Number	Applied For		
21	26 ENGLEWOOD F	L 34224	65-0325863	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
22	27	·····	G. Commodition States Bearings	Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip	Country	8. This corporation owes or has pa	aid the current year Intangible		
24 25		30	Personal Property Tax due June			
9. Name and Address of Cur	rrent Registered Agent		10. Name and Address of New Registered Agent			
DICKINSON, ROBERT A.		81 Name				
460 S. INDIANA AVENUE		82 Street	Address (P.O. Box Number is Not Acceptal	ole)		
ENGLEWOOD FL 34223				·		
		83				
, (		84 City		FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the p	ourpose of changing its registered		
11. Pursuant to the provisions of Sections 607 to office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob-	late of Florida. Such change was a digations of Section 607.0505. Flor	uthorized by the cor rida Statutes.	poration's board of directors. I hereby acce	pt the appointment as registered		
1/ /			7/2	2.67		
SIGNATURE Signatury typed or printed name of registered	agent and title if applicable [NO18	Registered Agent signature	e required when reinstating)	ATE		
12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE			
TITLE	DELETE	1.1 TITLE		Change Addition		
NAME <b>DILLON, BRENT J</b> .		1.2 NAME	}	]:		
STREET ADDRESS 9397 SAN BERNADINO AVI		1.3 STREET ADDRESS		l		
CITY-ST-ZIP ENGLEWOOD FL		1.4 CITY-ST-2IP				
TITLE	DELETE	2.1 TITLE		☐ Change ☐ Addition €		
NAME		2.2 NAME		Į		
STREET ADDRESS		2.3 STREET ADDRESS	İ			
CITY-ST-ZIP		2. 4 CITY - ST - ZIP	manana ar	25252U8		
TITLE	DELETE	3.1 TITLE	-07/30	797-010880-02040000		
NAME 🧃		3.2 NAME	****16	S.00 ****165.00		
STREET AFTORESS		3.3 STREET ADDRESS	4.4.4.4.26	.0100		
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TITLE	DELETE	5.1 TITLE		☐ Change ☐ Addition		
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STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY - ST - ZIP		√ V() 1		
TITLE	DELETE	G.1 TITLE		hange Addition		
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS	1	<b>\</b>		
CITY-ST-ZIP		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 to 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 to 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 to 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 to 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 to 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 to 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 to supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath annual report is true and accurate and that my signature shall have the same legal effect as if made under oath annual report is true and accurate and that my signature shall have the same legal effect as if made under oath annual report is true and accurate and that my signature shall have

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PHONE / FAX (941) 758-7071

OFFICE LOCATION 2311-A 63RD AVENUE E. BRADENTON, FL 34203

July 21, 1997

Department of State Attention: Annual Reports P.O. Box 6327 Tallahassee, FL 32314

I did not receive my Corporate Annual Report for 1997. This second notice was somehow sent to the correct address, while I must assume the first notice was sent to a p.o. box address that no longer exists since it is still listed on the form as the mailing address. I have made the proper corrections on this form, and forwarded the payment of \$165.00 per my phone conversation with your office.

Sincerely,

Donna White Dillon

Corporate Officer, Dillon & Dillon Machining, Inc.