## 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 # 1. Corporation Name

V36612

(2)

STANTAK INDUSTRIES, INC.

Address	. 1881: 211260 31150 8116 01181 11819 1181 8181: 8181: 8181: 8181: 8181: 8

**FILED** 

Mar 27 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address								OLDII DIGII BIBI	#         <del>   </del>			
1834 MAIN STREET 1834 MAIN STREET SARASOTA FL 34237 SARASOTA FL 34237								DO NOT WRITE IN THIS SPACE				
•									3. Date Incorporated or Qualified 05/14/1992			
2. Principal P	lace of Busin	ness	2a.	Mailing Address					4. FEI Number	Ap	plied For	
21			26	26					65-0345319 Not Applicable			
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State				City & State					6. Election Campaign Financing \$5.00 May Be			
23			28						Trust Fund Contribution Added to Fees			
Zip						Country  8. This corporation owes or has paid the current year Intangible						
24	A Nama	25 and Address of Curre	29	tored Ament	30	1			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
			nt Hegisi	rated Wiletin		81	Nam	<u></u>	10. Name and Address of New Negistered i	egon.		
		, ALEXANDER G.					1401)					
1834 MAIN STREET SARASOTA FL 34236					82	Stre	et Addres	ss (P.O. Box Number is Not Acceptable)				
						63 64	City			ng Zin /	Code	
_						04	City		FL	85 Zip (	COUB	
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												
12.	Signature, typed	or printed name of registered ag OFFICERS AN			E: Registere	d Age	nt signat	ure required	when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	PS INI 12	
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CITY-ST-ZIP					6.4 C	TY-S	T-ZIP		440 07/0V/3 Florida October 14 14 14 14 14 14 14 14 14 14 14 14 14			

14. 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 informatio 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.