

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90025 016 \*\*\*150.00

DOCUMENT # P96000048350

1. Corporation Name

Coventry Industries Corp.

Principal Place of Business

2415 SYCAMORE DR  
KNOXVILLE TN 37921  
US

Mailing Address

7777 GLADES RD.  
SUITE 211  
BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/17/92

4. FEI Number

650353816

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax.

☐

Yes

☒

No

2. Principal Place of Business

21 1900 Corporate Blvd

Suite, Apt. #, etc.

22 Suite 400 East

City & State

23 Boca Raton, FL

24 Zip 33431

Country

25 US

2a. Mailing Address

26 1900 Corporate Blvd

Suite, Apt. #, etc.

27 Suite 400 East

City & State

28 Boca Raton, FL

29 Zip 33431

Country

30 US

9. Name and Address of Current Registered Agent

PEARLMAN, CHARLES B  
200 EAST LAS OLAS BLVD.  
SUITE 1900  
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

Robert Hausman

82 Street Address (P.O. Box Number is Not Acceptable)

1900 Corporate Blvd

83

Suite 400 East

84 City

Boca Raton

FL

85 Zip Code

33431

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE 4/16/99

12. OFFICERS AND DIRECTORS

TITLE DS ☐ DELETE

NAME GANN, LESTER  
STREET ADDRESS 2415 SYCAMORE DR.  
CITY-ST-ZIP KNOXVILLE TN 37921

TITLE D ☒ DELETE

NAME HAUSMAN, ROBERT  
STREET ADDRESS 7777 GLADES RD., SUITE 211  
CITY-ST-ZIP BOCA RATON FL 33434

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE President ☒ Change ☐ Addition

2.2 NAME Robert Hausman  
2.3 STREET ADDRESS 1900 Corporate Blvd - Suite 400 East  
2.4 CITY-ST-ZIP Boca Raton, FL 33431

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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 attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4/16/99

Daytime Phone #

561-988-2544

0371292

CR2E034 (11/98)