

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J89528** (0) **NC**

1. Corporation Name

~~SAVA TRADING INTERNATIONAL, INC.~~
Industrial Rubber Specialties, Inc.

3-18-96
DRG



Principal Place of Business

Mailing Address

2061 MAIN AVENUE S.E.
P.O. BOX 37
HICKORY NC 28603

2061 MAIN AVENUE S.E.
P.O. BOX 37
HICKORY NC 28603

3. Date Incorporated or Qualified
08/25/1987

3a. Date of Last Report
04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2843087

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHITE, ROBERT
4214 REDWOOD AVENUE
JACKSONVILLE FL 32207

81 Name

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

83

84 City

FL

85 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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

PSD
GORUPIC, DRAGO
RT 5 BOX 1243
HICKORY NC

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

DVT
GORUPIC, MARY JANE
RT 5 BOX 1243
HICKORY NC

TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

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TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

PSD
Gorupic, Drago
380 9th Ave., NE Apt. 201
Hickory, NC 28601

1.2 NAME Change Addition

1.3 STREET ADDRESS Change Addition

1.4 CITY-ST-ZIP Change Addition

2.1 TITLE Change Addition

2.2 NAME Change Addition

2.3 STREET ADDRESS Change Addition

2.4 CITY-ST-ZIP Change Addition

3.1 TITLE Change Addition

3.2 NAME Change Addition

3.3 STREET ADDRESS Change Addition

3.4 CITY-ST-ZIP Change Addition

4.1 TITLE Change Addition

4.2 NAME Change Addition

4.3 STREET ADDRESS Change Addition

4.4 CITY-ST-ZIP Change Addition

5.1 TITLE Change Addition

5.2 NAME Change Addition

5.3 STREET ADDRESS Change Addition

5.4 CITY-ST-ZIP Change Addition

6.1 TITLE Change Addition

6.2 NAME Change Addition

6.3 STREET ADDRESS Change Addition

6.4 CITY-ST-ZIP Change Addition

100001802571
--05/01/96--01017--010
*****200.00**

DRG
4-30-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **Drago Gorupic** **4/23/96** (704) 324-4308
Date Daytime Phone #

CR2E034 (12/95)