

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 # 434686 (2)

1. Corporation Name

LAPIN SHEET METAL COMPANY



Principal Place of Business

4030 WHITCOMB AVE
ORLANDO FL 32839-8655

Mailing Address

4030 WHITCOMB AVE
ORLANDO FL 32839-8655

3. Date Incorporated or Qualified

09/10/1973

3a. Date of Last Report

03/24/1995

2. Principal Place of Business

2a. Mailing Address

21 3825 GARDENIA AVE

26 3825 GARDENIA AVE

4. FEI Number

59-1488755

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

LAPIN, RONALD J.

4030 WHITCOMB AVE
ORLANDO FL 32839

81. Name

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

3825 GARDENIA AVE

83.

84. City

ORLANDO

FL

85. Zip Code

32839

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

Ronald J. Lapin, President

4-29-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PO
LAPIN, RONALD J
17800 BONNIE VISTA CT
WINTER GARDEN FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
LAPIN, JANET
17800 BONNIE VISTA CT
WINTER GARDEN FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

2. TITLE
2. NAME
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3. TITLE
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5. TITLE
5. NAME
5. STREET ADDRESS
5. CITY - ST - ZIP

6. TITLE
6. NAME
6. STREET ADDRESS
6. CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald J Lapin

President

4/29/96

4030-1123-9897

CR2E034 (12/95)