

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Norman Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

**95 MAR 30 AM 9:27**

**DOCUMENT # F94000003903 (1)**  
 1. Corporation Name  
**MASTER STEEL ERECTORS, INC.**

Principal Place of Business <b>P.O. BOX 576 TRUSSVILLE AL 35153</b>	Mailing Address <b>P.O. BOX 576 TRUSSVILLE AL 35153</b>
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DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>07/26/1994</b>		3a. Date of Last Report	
2. Principal Place of Business 21. <b>7561 Gadsden Highway</b> 22. Suite, Apt #, etc.		4. FEI Number <b>63-0824801</b> Applied For <input type="checkbox"/> Not Applicable	
23. <b>Trussville, Alabama</b> City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24. <b>35173</b> Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25. <b>Jefferson</b> Country		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>DRISKELL, VICTOR 8306 LAUREL FAIR CIRCLE, SUITE 110 TAMPA FL 33610</b>				10. Name and Address of New Registered Agent			
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)			
83.				84. City			
				85. Zip Code <b>FL</b>			

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 \_\_\_\_\_ DATE \_\_\_\_\_  
The signature should be the printed name of registered agent and filed in separate column. NOTE: Registered Agent signature required when re-registering.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	NAME <b>MOORE, D W</b>	1. TITLE <b>President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>211 STERETT AVE.</b>	CITY, ST, ZIP <b>BIRMINGHAM AL 35209</b>	2. NAME <b>Driskell, Victor P.</b>	
		3. STREET ADDRESS <b>8306 Laurel Fair Circle, Suite 110</b>	
		4. CITY, ST, ZIP <b>Tampa, FL 33610</b>	
TITLE <b>V</b>	NAME <b>HOPSON, FRANK</b>	7. TITLE <b>Chairman</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>102 SHALLOW CREEK CIR.</b>	CITY, ST, ZIP <b>TRUSSVILLE AL 35173</b>	8. NAME <b>Hopson, Frank</b>	
		9. STREET ADDRESS <b>7561 Gadsden Highway</b>	
		10. CITY, ST, ZIP <b>Trussville, AL 35173</b>	
TITLE <b>V</b>	NAME <b>DRAKE, LAVON</b>	31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>RT 1 BOX 418</b>	CITY, ST, ZIP <b>ASHVILLE AL 35125</b>	32. NAME	
		33. STREET ADDRESS	
		34. CITY, ST, ZIP	
TITLE <b>S</b>	NAME <b>RUSSELL, JOHN</b>	41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>626 WINWOOD DR.</b>	CITY, ST, ZIP <b>BIRMINGHAM AL 35226</b>	42. NAME	
		43. STREET ADDRESS	
		44. CITY, ST, ZIP	
TITLE	NAME	51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		52. NAME	
CITY, ST, ZIP		53. STREET ADDRESS	
		54. CITY, ST, ZIP	
TITLE	NAME	61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		62. NAME	
CITY, ST, ZIP		63. STREET ADDRESS	
		64. 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)(b), 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 of this report or in an attachment with an address.

SIGNATURE:  Chairman  
 Frank Hopson  
 3-17-95 205/655-7451