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 #

H40880

(7)

S.B.S. PRECISION SHEET METAL, INC.

FILED
Jan 23 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address							DION THE BUILDING	H BIEN DIBN IDD
·								
16 MERRIL SHREWSBURY 4324 FORTUNE PLACE MELBOURNE FL 32804		% MERRIL SHREWSBURY 4324 FORTUNE PLACE				DO NOT WRITE IN THIS SPACE		
MELDOURNE	FE 32804	MELBOURNE FL 32904	MELDOURNE PL 32304			3. Date Incorporated or Qualified		
						02/04/1985		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-2499872		Not Applicable
Suite, Apt.	V, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.					75 Additional
22		27				b. Cermicate of Status Desired	F	e Required
City & State	•	City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28	T			Trust Fund Contribution		ded to Fees
Zip	Country	Žip	Cou	intry		8. This corporation owes or has paid		
24	25	29	30			Personal Property Tax due June 3 10. Name and Address of New Reg		_ ∐ №
9, Name and Address of Current Registered Agent					Name	10. Hame and Address of free Heg	erelen Whelir	
SHREWSBURY, EFFIE L.				81	Ttarrio			
	24 FORTUNE PLACE			82	Street Address (P.O. Box Number is Not Acceptable)			
ME	LBOURNE FL 32904			83	12			
				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	Bignature, typed or printed name of registrand age	ont and the if applicable (NOTI	E Registered	apA b	rit signature require	ed when reinstating)	DATE	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12
TITLE	\$D			TLE			Cha	nge Addition
NAME			1.2 N/	1.2 NAME				
STREET ADDRESS	ss 1924 TYLER AVE		1.3 ST	1.3 STREET ADDRESS				
CITY-ST-ZIP	MELBOURNE FL 14		1.4 0	1.4 City-St-ZiP				
TITLE	DELETE 2		2111	2111TLE			Cha	nge 🔲 Addition
NAME	SHREWSBURY, EFFIE L.		22 N					
STREET ADDRESS	600 AUBURN AVE.		2351	23 STREET ADDRESS				
CITY-ST-ZIP	MELBOURNE FL		2 4 C	2 4 City-St-ZiP				
TITLE	VP □ DELETE 3		3 1 TH	3 1 TITLE			☐ Cha	nge 🔲 Addition
NAME	SHREWSBURY, MERRIL		3 2 NA	3.2 NAME				
STREET ADDRESS			3 3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP			3 4. CITY - ST - ZIP		IT-ZIP			
TETLE	L DELETE		4 1 TII	4 1 TITLE			☐ Cha	nge 🔲 Addition
NAME			4 2 N	AME				
STREET ADDRESS			4.3 ST	REET	ADDRESS			
CITY-ST-ZIP			4.4 CI	4.4 CITY - ST - ZIP				
TITLE		☐ DELETE	51 TITLE				<u> </u>	nge 🔲 Addition
NAME			52 NAME					
STREET ADDRESS			5 3 STAEFT		ADDRESS			
CITY-ST-ZIP			5.4 00	DITY-SI-ZIP			<u>. </u>	
TITLE		DELETE 61		TITLE			☐ Cha	nge 🔲 Addition
NAME			6 2 NA	ME				
STREET ADDRESS	t		6.3 ST	REET	ADDRESS			
				6.4 CITY - ST - ZIP				
14. I hereby c	ertify that the information supplied w	ith this filing does not qualify fo	or the exe	empt	tion stated in :	Section 119.07(3)(i), Florida Statutes. I fu	irther certify tha	t the information

4. 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 change, i, or on an attachment with an address.

Sock 12 of Block 13 il Champan, or on an attachine by with an address.

Louise Shrewsbury

CR2E034 (10/97)