

**NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.**  
**DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).**

APPROVED  
AND  
FILED

10/2

0004924

**PROFIT CORPORATION ANNUAL REPORT 1998**

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



98 DEC -8 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P96000064708 (6)**  
 Corporation Name  
**STEEL WORKS, INC.**



Place of Business  
**EATON AVENUE JACKSONVILLE FL 32211**

Mailing Address  
**7147 EATON AVENUE JACKSONVILLE FL 32211**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**08/01/1996**

Principal Place of Business  
**26 7219 Holiday Hill Circle North**

Suite, Apt. #, etc.  
**27**

City & State  
**28 Jacksonville FL**

Zip  
**25 Country 29 32216 30 Country**

4. FEI Number  
**59-3397214**

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 or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**BRYANT, STEVEN E**  
**7147 EATON AVENUE**  
**JACKSONVILLE FL 32211**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
**100002713361--9**

83  
**-12/15/98--01083--008**

84 City  
**\*\*\*\*150.00 FL \*\*\*\*150.00**

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 \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
<input type="checkbox"/> DELETE	<b>P BRYANT, STEVEN E</b> <b>7147 EATON AVE</b> <b>JACKSONVILLE FL</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE	<b>VP</b> <b>NORTON, MARK D</b> <b>7219 HOLIDAY-HILL CIRCLE NORTH</b> <b>JACKSONVILLE FL</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> DELETE		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

Change Addition  
 JB  
 12-10-98

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.

SIGNATURE: Steve Bryant **SIGNATURE REQUIRED** Steve Bryant **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**  
 Date 12-2-98 Daytime Phone # 912-264-8376

CR2E034 (5/98)

**STEEL WORKS, INC.**



7219 HOLIDAY HILL CIRCLE NORTH ◆ JACKSONVILLE, FL 32216  
Phone 912-264-8376 ◆ Fax 912-264-1580

WFL

December 02, 1998

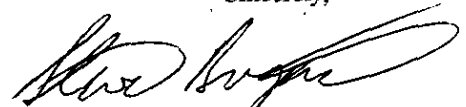
To whom it may concern

Please accept our apologies for being late with our 1998 Profit Corporation Annual Report. Our mailing address has changed however it seems that our change of address form did not go to the proper place. Our new address is as follows:

Steel Works, Inc.  
7219 Holiday Hill Circle North  
Jacksonville, FL 32216

We are enclosing our check and in the future if all correspondence is sent to the above address I promise that there will not be any late submittals again.

Sincerely,



Steve Bryant  
President, Steel Works, Inc.