## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

## Jul 01, 2002 8:00 am P96000064708 DOCUMENT # Secrétary of State 1. Entity Name STEEL WORKS, INC. 07-01-2002 90350 025 \*\*\*550 00 Mailing Address Principal Place of Business 7147 EATON AVENUE 7147 EATON AVENUE JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 2. Principal Place of Business Mailing Address Drive 267 KUSP DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3397214 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BRYANT, STEVEN E Street Address (P.O. Box Number is Not Acceptable) 7147 EATON AVENUE JACKSONVILLE FL 32211 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 344 19. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be ¿After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE NAME BRYANT, STEVEN E NAME ..... STREET ADDRESS 7147 EATON AVE STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Addition Delete TITLE Norton, Mark D NAME NORTON, MARK D NAME 115 DUNKINK Lane STREET ADDRESS 7219 HOLIDAY HILL CIRLCE NORTH STREET ADORESS Brunswick, GA 31523 JACKSONVILLE FL CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change -TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. 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 report or supplemental 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 11 or Block 12 if

Steve Bryant 6-26-02 912-264-8376

Date Daymer Phone #

FILED