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Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90196 010 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000052111

1. Corporation Name

SOUTH EAST FLORIDA POLYSTEEL, INC.



Principal Place of Business
4091 NW CINNAMON CIRCLE
JENSEN BEACH FL 34957

Mailing Address
4091 NW CINNAMON CIRCLE
JENSEN BEACH FL 34957

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1998 85-0847760

4. FEI Number

85-0847760

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 the current year Intangible
Personal Property Tax.

☐

Yes ☐ No

2. Principal Place of Business

21 1004 NE ORANGE AVE

Suite, Apt. #, etc.

2a. Mailing Address

26 1004 NE ORANGE AVE

Suite, Apt. #, etc.

City & State

23 JENSEN BEACH, FL

Country

24 34957

25

City & State

28 JENSEN BEACH, FL

Zip

29 34957

Country

30

9. Name and Address of Current Registered Agent

JUEN, PETER

4091 NW CINNAMON CIRCLE

JENSEN BEACH FL 34957

10. Name and Address of New Registered Agent

81 Name

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

83

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST ☐ DELETE
NAME JUEN, PETER 1004 NE ORANGE
STREET ADDRESS 4091 NW CINNAMON CIRCLE
CITY-ST-ZIP JENSEN BEACH FL 34957 AVE

TITLE D ☐ DELETE
NAME JUEN, PETER 1004 NE ORANGE
STREET ADDRESS 4091 NW CINNAMON CIRCLE
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

CR2E034 (11/98)