PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000015631**

AAA STEEL BUILDINGS, INC.

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90041 048 ***150.00



Principal P ace	e of Business	Mailing Address						
5540 LILAC AVENUE MILTON FL 32570		5540 LILAC AVENUE						
		MILTON FL 32570		DO NOT WRITE IN THIS SPACE				
					3. Date I rcorporated or	Qualifed		
					02/23/1994			
2. Principal P	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		ļ l	pplied For
₂₁ 2 ਤਿ	SAYOU DRIVE	26		59-3238693			of Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status	Certificate of Status Desired			
22		27						
23 FT. WALTON BCH, FL.		City & State		Electic n Campaign F Trust Fund Contribut	ion	\$5.00 May Be Added to Fees		
Zip Country		Zip			8. This corporation owe		ntangible Yes	∃No
₂₄ 3254	7 25		30		Personal Property Table 10. Name and Address			
	9. Name and Address of Curren	Registered Agent	8	1 Name	10. Name and Address	Of New Registers	3 Agent	
CAM	PBELL, EDWARD		Ľ					<u> </u>
	RELL & CAMPBELL		8	2 Street Add	dress (P.O. Bo): Number is N	ot Acceptable)		
207 FLORIDA PLACE SE			8	3			_	
FT. WALTON BEACH FL 32549							·	
• • • •			8	4 City		E	85 Zip	Code
SIGNATUF:E	Signature, typed or printed name of registered agen		E Registered Ag	ent signature requir	red when reinstating) ADDITI DNS/CHANGI	DATE ES TO OFFICERS	AND DIRECT	ORS IN 12
12.		D DIRECTORS Delete	13.		ADDITI DNS/CHANG		Change	
TITLE	P ADAMS OFORCE !		1.1 MAME					
NAME	ADAMS, GEORGE L. 5540 LILAC AVENUE			ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	MILTON FL		1.4 CITY-	i i				
TITLE	MICTORY	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME			2 2 NAM	=				
STREET ADDRESS			23 STRE	ET ADDRESS				
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			32 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		☐ DELETE	3.4, CITY				Change	Addition
TITLE		☐ percie	4.1 TITLE 4. 2 NAM					
NAME expect appears				ET ADDRESS				
STREET ADDRESS			4.3 STRE					
CITY-ST-ZIP TITLE	 	☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME		_	5.2 NAMI					
STREET ADDRESS			5.3 STRE	ET ADDRESS				
CITY-ST-ZIP			54 CITY	-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME			6.2 NAM	E				
STREET ADDRESS			6 3 STRE	ET ADDRESS				
	İ		0.4.00774	ST. 7ID				

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 suppliemental 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 for 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: <

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

838.876.1132