


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2005 8:00 am
Secretary of State

01-19-2005 90005 019 ***150.00

DOCUMENT # P99000091393

1. Entity Name
AAA STEEL FABRICATORS, INC.



Principal Place of Business
1811 NW 16TH STREET
POMPANO BEACH, FL 33069

Mailing Address
1811 NW 16TH STREET
POMPANO BEACH, FL 33069

50003594



01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0955036	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JULIANO, TOM
12044 CLASSIC DR
CORAL SPRINGS, FL 33071

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JULIANO, THOMAS 12044 CLASSIC DR. CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SHERIFF, GARY 4739 NW 119 AVENUE CORAL SPRINGS, FL 33076
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DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Tom Juliano Pres Date: 1-11-05 Daytime Phone #: 954-969-0712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR