

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 203987 (3)
1. Corporation Name
WEST GATE SHEET METAL, INC.

Principal Place of Business
834-13TH COURT. W.
RIVIERA BCH. FL 33404

Mailing Address
834-13TH COURT. W.
RIVIERA BCH. FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/03/1957	4. FEI Number 59-0806244	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent
BURNS, JOHN L
140 ROYAL PALM WAY
PALM BEACH FL 33480

10. Name and Address of New Registered Agent
81. Name MICHAEL S. SINGER
82. Street Address (P.O. Box Number is Not Acceptable) 101 NORTHPOINT PARKWAY
83. Suite SUITE 330
84. City WEST PALM BEACH FL
85. Zip Code 33407

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 _____ DATE 3-13-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STD	MATTSON, DAVID P.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
8672 DOVERBROOK DRIVE		1.3 STREET ADDRESS	
PALM BEACH GARDENS FL		1.4 CITY-ST-ZIP	
VD	WOOD, MICHAEL B.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1199 CHERLYNN TERR.		2.1 TITLE	
W. PALM BCH. FL		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
PD	STERLING, THOMAS J.	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
7051 ST. ANDREWS LN.		3.1 TITLE	
LAKE WORTH FL 33467		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		6.1 TITLE	
		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.

SIGNATURE: David P. Mattson 3-13-98 1-561-845-3440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0310007

CR2E034 (10/97)