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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 252234 1. Corporation Name

ST. PETERSBURG STEEL CORPORATION

Principal Place of Business Mailing Address							- !!##!!	6 11 <b>06</b> 1 85118 11818 71881	I IIIII MAMA MAMA	Atali Brais Brasi A	(AU) BIBLI (BŮ)
10585 47TH ST N CLEARWATER FL 33762		P.O. BOX 1158 1158 (PINELLAS PARK, FL 34664)									
US ·		PINELLAS PARK FL 33780				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed					
		US .					3. Date incom	-	eu .		
9 Principal D	ace of Business	2a. Mailing Address					4. FEI Numb			An	plied For
<del>-</del>	ace of Business	Za. Walling Address					59-0965		•		t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.								\$8.75	
22		27				,		of Status Desired		_ Fee Re	quired
City & State	9	City & State				6. Election C	ampaign Financin	g 🗆	\$5.00	7 1	
23		28					Trust Fund	d Contribution		Added	o Fees
Zip	Country	Zip	Country				8. This corporation owes the current year Intangible				
24	25	29	30	_				Property Tax.	. Doelstore	X Yes	□No
	9. Name and Address of Curren	t Registered Agent		81	Nam		10. Name an	d Address of Nev	v registere	u Agent	
ESPO	OSITO,F.T.			ויי	l						
	13TH LANE N.E.			82	Stre	et Addre	ss (P.O. Box No	imber is Not Acce	ptable)		ļ
	ETERSBURG FL 33703			83	<b></b>			<del>-</del>			
-		,				• •					
	•	•		84	City				F	85 Zip	Code
44 Purguant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statut	es, the a	bove	-nam	ed corpo	ration submits t	his statement for t	he numose i	of changing its	registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was a	uthorized	1 bv	tne co	rporation	n's board of dire	ctors. I hereby ac	cept the app	ointment as re	gistered
•	m tamiliar with, and accept the obliga	lions of, Section 607.0005, Flo	ilua Stati	u iÇS.							
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable. (NOTE	: Registered	Agen	t signatu	re required	when reinstating)		DATE		
12.		D DIRECTORS	13.				ADDITION	S/CHANGES TO	OFFICERS A		
TITLE	PD ·	☐ DELETE	1.1 Π	TLE			•			Change	Addition
NAME	ESPOSITO, F T		1.2 N	ME							
STREET ADDRESS	4133-13TH LANE, NE		1.3 ST	REET	ADDRE:	SS					
CITY-ST-ZIP	ST PETERSBURG, FL 00000		1.4 CT	TY-SI	r-ZiP			<u> </u>	****		
TITLE	TD	☐ DELETE	2.1 TI	TLE						Change	Addition
NAME	ESPOSITO, DONNA L		2.2 N/	WE							
STREET ADDRESS	4133-13TH LANE, NE		2.3 \$7	REET	TADORE	ss					
CITY-ST-ZIP	ST PETERSBURG, FL 00000		2.4C	- 1		_					☐ A JJESS
TITLE		DELETE	· 3.1 TI							☐ Change	☐ Addition
NAME			3.2 N								
STREET ADDRESS					T ADDRE	SS					
CITY-ST-ZIP		☐ DELETE	_		ST-ZIP	+		<u></u>	•	☐ Change	Addition
TITLE			4.1 TI							change	
NAME	•		4. 2 N								
STREET ADDRESS					TADORE	SS					
CITY-ST-ZIP		☐ DELETE	4.4 CI 5.1 TI		I-ZIP			<del></del>		☐ Change	Addition
TITLE		Lad Deckere	5.2 N					•			_
NAME					T ADDRE	ss	<b>S</b>	•			
STREET ADDRESS	• ,		5.4 CI								
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI			<del></del>	<del></del>			☐ Change	☐ Addition
			6.2 N/	AME							
NAME CTREET ADDRESS			6.3 ST	TREET	T ADDRE	ss		-			

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.

727 573-7777

**FILED** 

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90080 023 \*\*\*150.00