FILED Apr 23, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUI	MENT # 270937	•						
1. Corporation	i Name					i i		
SEVENII	EENTH STREET IRON AND	WETAL CO.				1 198119 (1811 1861) 931(# (B)98 1(1)) (88) 9(8))	BLOTT BIRTH RIVER	EN 9186 1891
Principal Place	of Business	Mailing Address				-	05011 01911 01011 01	ON ORDIN CONT.
530 17TH STRE		530 17TH STREET]		
WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407						DO NOT WOLTE IN THE	0.00405	
US US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
*	•					06/14/1963		
2 Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	Apr	lied For
21	•••	26				59-1009179	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	dditional
22		27					Fee Rec	
City & State	e ,	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23	Country	Zip	Country			Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible		
Zip 24	25 Country		30	.,		Personal Property Tax.		□No
	9. Name and Address of Curre					10. Name and Address of New Registered	d Agent	-
			8	1 Name	9			
MITCHELL, RONALD L				2 Stree	t Addre	ss (P.O. Box Number is Not Acceptable)		
	17TH STREET							
WES	T PALM BEACH FL 33407		8	3				
			8	4 City		F	85 Zip C	ode
		00 COZ 4500 Florido Ctotuto	- the she	, , , , , , , , , , , , , , , , , , ,	d como	oration submits this statement for the purpose of		registered
office or r	egistered agent or both in the State	of Florida. Such change was au	ithorized b	v the cor	poration	n's board of directors. I hereby accept the app	ointment as reg	jistered
agent. I a	m familiar with, and accept the oblig	ations of Section 607.0505, Flor	nda Statute	2S.			ىرى ئىلىنى ئىلىن ئىل ئىلىن ئىلىن ئى	٠. ټ
SIGNATURE	Signature, typed or printed name of registered ago	ent and title if applicable. (NOTE:	Registered Ag	ent signature	required v	when reinstaling) DATE		
12.		ND DIRECTORS	13.	••		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	P	☐ DELETE	1.1 TITLE				Change	Addition
NAME [MITCHELL, RONALD L		1.2 NAME			•		
STREET ADDRESS	530 17TH STREET			ET ADDRES	S			
CITY+ST-ZIP			1.4 CITY- 2.1 TITLE		_		☐ Change	☐ Addition
TITLE			2.2 NAME					
NAME STREET ADDRESS				- ET ADDRES	s			
CITY-ST-ZIP	المعادم المسائد المام	+ చి≾ి కాని క	2.4 CITY		_	er er er		}
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAMI	E				
STREET ADDRESS			3.3 STRE	ET ADDRES	s			Į
CITY-ST-ZIP			3.4. CITY	-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	•			Change	Addition
NAME	,		4. 2 NAM					
STREET ADDRESS				ET ADDRES	S			
CITY-ST-ZIP		☐ DELETE	4,4 CITY- 5.1 TITLE		+		Change	Addition
TITLE			5.1 MAM					
NAME STREET ADDRESS				ET ADDRES	s	·-		ļ
CITY-ST-ZIP			5.4 CITY					
TITLE		☐ DELETE	6.1 TITLE				Change	Addition
NAME	, 1,1		6.2 NAM	E				
etheet andhere	[1] 《始日》(1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2		6.3 STRE	ET ADDRES	s			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

4/19/99

561-659-3400

Daytime Phone #