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**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # 454474

PRIAD STEEL ERECTORS, INC.



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90118 008 \*\*\*150.00

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Principal Place of Business Mailing Address 16142 HANNA RD. 16142 HANNA RD. LUTZ FL 33549 LUTZ FL 33549 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/10/1974 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-1537727 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes the current year Intangible 4 30 29 Personal Property Tax. Yes □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GARCIA, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 2713 FIRST FINANCIAL TOWER TAMPA FL 83 City 85 Zio Code 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature require 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETE ITLE 11TITLE ☐ Change Addition TAYLOR, DANIEL G. **IAME** 1.2 NAME 16142 HANNA RD. TREET ADDRESS 1.3 STREET ADDRESS **LUTZ FL** YTY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE TILE Addition 2.1 TITLE Change TAYLOR, ROSEMARIE K. IAME 2.2 NAME TREET ADDRESS 16142 HANNA RD. 2.3 STREET ADDRESS **LUTZ FL** ITY-ST-ZIP 2.4 CITY-ST-ZIP ITLE ☐ DELETE Change ☐ Addition 3.1 TITLE AME 3.2 NAME TREET ADDRES 3.3 STREET ADDRESS ITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE TLE ☐ Addition 4.1 TITLE AMF. 4.2 NAME TREET ADDRESS 4.3 STREET ADDRESS ITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE Change 51 TITLE ☐ Addition 5.2 NAME TREET ADDRESS 5.3 STREET ADDRESS ITY-ST-ZIF 5.4 CITY-ST-ZIP ☐ DELETE πE Change ☐ Addition AME 6.2 NAME

4. 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

6.3 STREET ADDRESS

**IGNATURE:** 

TREET ADDRESS

ITY-ST-ZIP

CR2E034 (11/98)