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 # 533098

B & B STEEL ERECTORS, INC.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90028 009 ***158.75



Principal Place	of Business	Mailing Address		1 (01)						
9428 WALDSTRASSE COURT		P.O. BOX 621177								
ORLANDO FL 32824		ORLANDO FL 32862-1177				DO NOT WRITE IN THIS SPACE				
US					3. Date Inco	3. Date Incorporated or Qualifed				
					05/04/1	•				
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Numb			Ap	plied For	
21		26			59-1744	1697	/	_ 	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						\$8.75	Additional	
22		27	27			of Status Desired		Fee Re	equired	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fun	Trust Fund Contribution Added to Fees				
Zip Country		Zip Country				oration owes the curr	-			
24	25	29 30	<u>l</u> ,			Property Tax.		Yes	□No	
	9. Name and Address of Current	Registered Agent		<u> </u>	10. Name an	d Address of New F	Registered A	gent		
ni mi	SCED LONNIE		81 Nan							
	NSED, LONNIE	82 Street A			Address (P.O. Box N	dress (P.O. Box Number is Not Acceptable)				
	S RIO GRANDE AVE			128 W	-1-USTRA-S	Je C	/			
	E 202B		83	RIGNOO	FILE		33	2824		
UKLA	NDO FL 32809		}	84 City	V-10-11 10 0			85 Zip	Code	
				. ,			<u>FL</u>			
office or re	o the provisions of Sections 607.0502 sgistered agent, or both, in the State o n familiar with, and accept the obligati	f Florida. Such change was auth	orizea	by the corp	corporation submits to coration's board of dire	his statement for the ctors. I hereby accep	purpose of c of the appoint	nanging its ment as re	registered gistered	
SIGNATURE							,			
	Signature, typed or printed name of registered agent			Agent signature	required when reinstating)	S/CHANGES TO OF	DATE FICERS AND	DIRECTO	RS IN 12	
12.	OFFICERS AND	D DIRECTORS DELETE	13.	E	ADDITION	S/UNANGES TO UF	FICERS AND	Change	Addition	
· TITLE	P CUDNETO III LONNIE	□ Nerele								[]
NAME	BURNSED, III, LONNIE		1.2 NAI							
STREET ADDRESS	6000 S RIO GRANDE 202B			REET ADDRESS						
CITY-ST-ZIP	ORLANDO FL	☐ DELETE	1.4 CITY .ETE 2.1 TITL					☐ Change	☐ Addition	
TITLE	ST CHICKED ID LONDIE	□ DECEIE								
NAME	BURNSED, JR., LONNIE		2.2 NA							
STREET ADDRESS	6000 S RIO GRANDE 202B	~		REET ADORESS		، د د			,	
CITY-ST-ZIP	ORLANDO FL	DELETE	2.4 CF	ry-st-zip	·			Change	Addition	
TITLE	VP	O DETELE								Ì
NAME	BURNSED, WILLIAM M		3.2 NA							
STREET ADDRESS	6000 S RIO GRANDE 202B			REET ADDRESS						}
CITY-ST-ZIP	ORLANDO FL	☐ DELETE	3.4. CIT	Y-ST-ZIP	 			Change	Addition	
TITLE	•	C) DETELL	4.1 III							
NAME				ME REET ADORESS						
STREET ADDRESS										
CITY-ST-ZIP		☐ DELETE		Y-ST-ZIP	+			Change	☐ Addition	}
TITLE		□ pereie	5.1 TIT 5.2 NA						L., . 144.4011	
NAME				REET ADDRESS						
STREET ADDRESS				Y-ST-ZIP						
CITY-ST-ZIP		☐ DELETE	6.1 TIT					☐ Change	☐ Addition	Ì
TITLE	tong to the design	□ pereic	6.2 NA							
NAME:	The state of the s			REET ADDRESS						
STREET ADDRESS	Control of the State of the			Y-ST-ZIP						l
C/TY-ST-Z/P		,	0.4 UII	1-01-4P	1					١

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.

SIGNATURE: