	SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE			TO REINSTATE: \$750).		FILED	
CORPORATION ANNUAL REPORT		Kathe	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State			99 SEP 27 PM	12: 04
	1999	Secretion OF	•		ONS		
DOCU	DOCUMENT # FORODOGGGG					SECRETARY OF STATE TALL AMAGSEE, FLORIDA	
1. Corporatio		_				·	
MILDAAE	ST STEEL ERECTION, IN	٠,) (CONTINUE TO THE CONTINUE CO	ING PAINT (NA AUGA MGA PAN (PA)
							
Frincipal Place of Business Mailing Address							
2525 E. GRAND BLVD. DETROIT MI 48211 2525 E. GRAND BLVD. DETROIT MI 48211							•
						DO NOT WRITE IN TH	IIS SPACE
						 Date Incorporated or Qualified 07/26/1995 	
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	Applied For
n	26					38-2871555	Not Applicable
Suite, Apt	Soile, Apt #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	City & State City & State 28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip .:T	Country	Zip	├ ──┐	untry		8. This corporation owes the current year	Yes No
[4]	25 9. Name and Address of Curr	29 rent Registered Agent	30			Intangible Personal Property. 10. Name and Address of New Registers	Company Lagrange
		<u>.=</u>		81	Name		
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324						ress (P.O. Box Number is Not Acceptable)	
				84	City	****950. 0 F	L ****950.00
11. Pursuant	t to the provisions of sections 607.0	502 and 607.1508, Florida Statut	es, the at	×òve-	named corpor	ation submits this statement for the purpose of	changing its registered
office or agent 1 a	registered agent, or both, in the Sta am familiar with, and accept the ob	ate of Florida. Such change was ligations of, section 607,0505, Fi	authorize orida Sta	d by tutes	the corporatio	on's board of directors. I hereby accept the ap-	pointment as registered
SIGNATURE	·					·	
				Registered Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	ST	DELETE	1.1 T	TLE	VP		Change Addition
12 .					1 1		
ITLF	SMITH, SHELDON D	y=<	1.2 N	AME	H	TYES, Edward M.	•
HTLF NAME	2525 E. GRAND BLVD.	<i>y</i> - x			ADORESS 25	TYES, Edward M. as E. Grand Blud.	,
HTLF NAME STREET ADDRESS CITY-ST-ZIP	2525 E. GRAND BLVD. DETROIT MI 48211	, ,	1.3 S	REET	ADDRESS 25	ATOIT, MI 48211	
HTLF NAME STREET ADDRESS CITY-ST-ZIP HTLE	2525 E. GRAND BLVD. DETROIT MI 48211 VD	DELETE	1.3 S 1.4 C 2.1 Ti	TREET / TY-ST- TLE	ADDRESS 25	as E. GRAND BLUE.	Change Addition
HTLF NAME STREET ADDRESS CHTY-ST-ZIP CHTLE KAME	2525 É. GRAND BLVD. DETROIT MI 48211 VD ANDERSON, KIP D	, ,	1.3 S ¹ 1.4 C 2.1 Tr 2 2 N	TREET / TY-ST- TLE AME	ADORESS 25	as E. GRAND BLUE.	Change Addition
ITLE NAME STREET ADDRESS CITY-ST-ZIP ITLE NAME STREET ADDRESS	2525 É. GRAND BLVD. DETROIT MI 48211 VD ANDERSON, KIP D 2525 E. GRAND BLVD.	, ,	1.3 S ² 1.4 C 2.1 Tr 2 2 N 2.3 S ²	TREET / TY-ST- TLE AME TREET /	ADDRESS 25 ADDRESS	as E. GRAND BLUE.	Change Addition
ITLE NAME STREET ADDRESS CITY-ST-ZIP ITLE SAME STREET ADDRESS CITY-ST-ZIP	2525 É. GRAND BLVD. DETROIT MI 48211 VD ANDERSON, KIP D 2525 E. GRAND BLVD. DETROIT FL 48211	₹ DELETE	1.3 S 1.4 C 2.1 T/ 22 N 2.3 S 2.4 C/	TREET / TLE TLE TREET / TY-ST-	ADDRESS 25 ADDRESS	as E. GRAND BLUE.	
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	2525 É. GRAND BLVD. DETROIT MI 48211 VD ANDERSON, KIP D 2525 E. GRAND BLVD. DETROIT FL 48211 P BROAD, GARY 2525 E. GRAND BLVD. DETROIT MI 48211 VPT	₹ DELETE	1.3 S ² 1.4 C 2.1 Ti 2.2 N 2.3 S ² 2.4 Ci 3.1 Ti 3.2 N 3.3 SI	TREET / TLE TREET / TY-ST- TLE TREET / TLE TREET / TLE TREET / TY-ST-	ADDRESS 25 ADDRESS ZIP ADDRESS ZIP	AS E. GRAND BLUE. Aroit, MI 48211	
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5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

14. Thereby certify that the information supplied with this filing does not qualify for the semption 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; the 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 in Block 12 or Block 13 if changed on an attachment with an address. 9-2-99 SIGNATURE:

DELETE

STREEFADORESS

STREE! ADDRESS

City-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Change Addition