

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

FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000003727 (1)

1. Corporation Name
STUPP BROS., INC.

Principal Place of Business
120 SO CENTRAL STE 1650
ST LOUIS MS 63105

Mailing Address
120 SO CENTRAL STE 1650
ST LOUIS MS 63105



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/17/1997	
21		26		4. FEI Number 43-0542490	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country	29	Zip
24		25		29	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SO PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip 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 required when reinstating)

DATE

1/14/98

12. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> DELETE
NAME	STUPP, ERWIN P JR	
STREET ADDRESS	120 SO CENTRAL AVE STE 1650	
CITY-ST-ZIP	ST LOUIS MO 63105-1705	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	STUPP, ERWIN P JR	
STREET ADDRESS	120 SO CENTRAL AVE STE 1650	
CITY-ST-ZIP	ST LOUIS MO 63105-1705	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	STUPP, JOHN P JR	
STREET ADDRESS	120 SO CENTRAL AVE STE 1650	
CITY-ST-ZIP	ST LOUIS MO 63105-1705	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	STUPP, ROBERT P	
STREET ADDRESS	120 SO CENTRAL AVE STE 1650	
CITY-ST-ZIP	ST LOUIS MO 63105-1705	
TITLE	S	<input type="checkbox"/> DELETE
NAME	HEHER, JOAN J	
STREET ADDRESS	120 SO CENTRAL STE 1650	
CITY-ST-ZIP	ST LOUIS MS 63105	
TITLE	VTAS	<input type="checkbox"/> DELETE
NAME	TURNER, THOMAS L	
STREET ADDRESS	120 SO CENTRAL STE 1650	
CITY-ST-ZIP	ST LOUIS MS 63105	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 even attachment with an address.

SIGNATURE

1/14/98

CR2E034 (10/97)