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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G75655

(2)

QUALITY SHEET METAL SERVICES, INC.

FILED Mar 27 1997 8:00am Secretary of State



	ce of Business	Mailing Address			i (abitet 90th inner bleis Griet Aviet alle		
1716 HARPER ST. JACKSONVILLE FL 32204 US		_	1716 HARPER ST. JACKSONVILLE FL 32204-2020 US				
00		•			3. Date Incorporated or Qualified 12/22/1983	3a. Date of La 04/08/199	
2. Frincipal Place of Business		2a. Mailing Address			4, FEI Number		Applied For
21		26			59-2353545		Not Applicable
Suite, Apt	t #, etc	Suite Apt. #, etc.			5. Certificate of Status Desired		75 Additional ee Required
22 City & Sta	ite	City & State			Election Campaign Financing		.00 May Be
23		28			Trust Fund Contribution		ded to Fees
Ζφ	Country	Zip	Country	y	8. This corporation has liability for i		·····
24	25	29	30			Yes No	
	9. Name and Address of Cu	irrent Registered Agent			10. Name and Address of New Re	gistered Agent	
MAI	LOY, RONALD LEE		81	Name			
	01 COUNTRY PLACE		82 Street		Address (P.O. Box Number is Not Acceptable)		
JACKSONVILLE FL 32226			82 Street		doress (P.O. Box Number is Not Acceptable)		
J/ 10	.,		83	 			
			84	City		FL 85	Zip Code
eigen i			Florida Statute	•			
SIGNATURE	Signature typed or printed name of registeri				ired when reinstating)	DATE	-
	Segments of typest of professional tension of tensional OFFICERS	ed agent and tide if applicable the SAND DIRECTORS			uired when reinstating) ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	
SIGNATURE	Signature types or printed name of registers OFFICE RS	ed agent and lion if applicable (f	NOTE: Registered Ag				
SIGNATURE	Signature Types of posited national register OFF ICE RS PT MALOY, RONALD LEE	ed agent and tide if applicable the SAND DIRECTORS	NOTe: Registered Age			ERS AND DIREC	
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4. I do hereby cortry that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Horida Statutes. Frurther 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 13 if or niged, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PR

NAME OF SIGNING OFFICER OR DIRECTOR

AD C. MALOY

3/20/97 (904)354