FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # H9//91 (8) 1. Corporation Name IMPERIAL ENGINEERING AND FABRICATION, INC. Principal Place of Business Mailing Address									
1333 BRUNNE		1333 BRUNNELL PRKWY							
LAKELAND FL 33806 LAKELAND FL									
						3. Date Incorporated or Qualified 01/13/1986	3a. Date	of Last Re 3/21/199	port 1 5
2. Principal Place	ce of Business	2a. Mailing Address 26			4. FLI Number 59-2627932			pplied For lot Applicable	
Suite, Apt. #.	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional tequired	
City & State		28	the first of the contract of t			Election Campaign Financing Trust Fund Contribution		Added	May Be I to Fees
Zip 24	Country 25 9. Name and Address of Curr	[30]				8. This corporation has liability for Florida Statutes 10. Name and Address of New F	i □ No		
SIGNATURE						ration submits this statement for the pu ard of directors. I hereby accept the app			Code egistered office agent. I am
12 .	lgrature, typed or printed haline of registered ag OF LICERS A	and and title if applicable. AND DIRECTORS	JTO//)	Registered Agent	signature requin	ed when reinstatings ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	8S IN 12
THILE NAME STREET ADDRESS CITY-ST-ZIP	P Hissem, Kevin E. 3925 Chart Prine Rd. Lakeland Fl 33809		DELETE		ADDRESS				Addition
TITLE NAME STREET ADDRESS	DETEL		TE	2 1 TILLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP			Ē	Change	Addition
TITLE NAME STREET ADDRESS		C DELL	:1E	3 1 HTLF 3.2 NAME 3.3. STREET	ADDR:SS		Ć	Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		[] DEU	16	34 CHY-S 4 1 HILE 42 NAME 43 STREET		and the second s	[Change	Addition

CITY-ST-ZIP 6.4 CHTY - ST - ZIF 14. I do hereby certify that the information supplied with this filing is votuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 an artistachment with an address.

44 CHY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

5 1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-2IP

CHTY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

DELETE

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Change

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