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

PROFIT , CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of SteNo DIVISION OF CORPORATIONS

POCUMENT # J64232

(8)

1. Corporatio	OFING & SHEET METAL W	ORKS, INC.			IZIK KIRU ENGU RAKU RAKU RAKU 1881
Principal Place of Business Mailing Address				T ABBAND DING DAILIT BIBID DIBBR ADING CIDA	IRIL BIRUL BIBIT BIRIT RIGIL BIRIT 1991
% BARBARA LA 6700-23RD STR ST PETERSBUR	REET NORTH	% BARBARA LAGARES 6700-23RD STREET NORTH ST PETERSBURG FL 33702-5	608		
				3. Date Incorporated or Qualified 03/20/1987	3a. Date of Last Report 07/12/1996
_	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt.	# etc	Suite, Apt. #, etc.		59-2781710	Not Applicable \$8.75 Additional
22	, 616.	27		5. Certificate of Status Desired	Fee Required
City & Stat	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28	Country	1rust Fund Contribution	Added to Fees
24	[25]	Zip 3	o	8. This corporation has liability for in Florida Statutes	yangible tax unders. 199.032, Yes □ No
	9, Name and Address of Curren			10. Name and Address of New Reg	
LAGARES, BARBARA 81 Name A C				GARRES FrAN	K
				ess (P.O. Box Numbar is Not Acceptab	c)
\$T F	PETERSBURG FL 33702		83 6.7	100 23 ATM	
	į.			1111	
	,		84 City	Alito	FL 85 Zip Coop A
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 register 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 this appointment as register					
agent. I a	registered agent, or both, in the State am familia) with, and appent the puliga	of Florida. Such charige was au itions of, Section 607.0505, Flori	thorized by the corporat da Statules.	ion's board of directors. I heroby accep	t the appointment as registered
SIGNATURE	mut ca	ga-			1/32/97
12,	Signature, typed or printed name of registered agen OFFICERS AND	<i></i>	Bagistoriid Agent signature require 13.	ed when reinstating) ADDITIONS/CHANGES TO DEFIC	FRS AND DIRECTORS IN 12
TITLE	D	DELETE	LA TALE	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	LAGARES, BARBARA		1.2 NAME	MAN LAGARES	
STREET ADDRESS	6700-23RD STREET NORTH		1.3 STREET ADDRESS	7000 23 APW	
CITY-ST-ZIP	ST PETERSBURG FL	DELFTE	1.4 O(1Y - ST - ZIP	Mut 3210.	Change Addition
NAME		בַן סוולונ	2.1 TITLE	•	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CJTY - ST - ZIP		
TITLE		DOTTE	3.1 TITLE	t.	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STHEFT ADDRESS		
CITY+ST-ZIP TITLE		DELETE	3.4. C(TY × S1 - Z(P) 4.1 T(TLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		·	44 CITY - ST - ZIP		
TITLE		DELFTE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		•	5 3 STREET ADDRESS (
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5.4 C(T)Y - ST - Z(P) 6.1 T(T)E		Change Addition
NAME			62 NAME		en a marka fina sequent
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CHY-S1-ZIP		
14. I do here	by 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 charged, or on an another more trustee of the corporation of the receiver of of the receiver of the corporation of the receiver of the receiver of the receiver of the corporation of the receiver of the r