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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K31161

K-C SHEET METAL INC.

(8)

FILED)
Feb 06 1997	8:00am
Secretary of	f State



mnncipal mac	rfindpal riace of Business Mailing Aduless										
907-B SE 13 PI CAPE CORAL F		907-B SE 13 PL CAPE CORAL FL 33990	0-3066								
								Date of Last Report 5/01/1996			
2. Principal F	lace of Business	2a. Mailing Address			***************************************	4. FEI Number		Ì	Ap	plied For	
1		26				65-0068813			No	t Applicabl	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, et			5. Certificate of Status Desiren		5. Certificate of Status Desired	\$8.75 Additional				
27				or contract of citation bearing				Fee Required			
City & State		City & State				6. Election Campaign Financing		•		Мау Ве	
3	28				Trust Fund Contribution	<u> </u>			o Fees		
Zip □			Cour	ntry		8. This corporation has liability for in	ntangible t	ax un	Jer s.	199.032,	
4 25		29 .	30			Florida Statutes 10. Name and Address of New Reg		No			
	9, Name and Address of Curre	ant Hegistered Agent		81	Name	10. Name and Address of New He	IISTOTOU A	gorit			
	ES, JEROME J. SR	#									
	B SE 13 PL			B2	Street Add	ress (P.O. Box Number is Not Acceptab	e)				
CAP	E CORAL FL 33990		ļ	83							
				33							
				84	City		F-,	85	Zip (ode	
·						poration submits this statement for the p	FL	<u> </u>			
SIGNATURE	Signature, typed or printed name of registered a OFFICERS AI	igent and title if applicable ND DIRECTORS	(NOTE: Registered	Ager	nl signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	OIRE	TOR	S IN 12	
iitle	VD OFFICE 1874	DELETE		TI F		ADDITIONO/OTTAINGED TO OTTE	LITO AIRD	Ch		Addition	
IAME	CROUCH, DUANE LEE		1.2 NA		1						
STREET ADDRESS	1804 SE 10 ST				ADDRESS						
DITY - ST - ZIP	CAPE CORAL FL		1.4 Cit								
UTLE	PD	DELETE					····-	Chi	inge	Additi	
IAME	KEIM, ARTHUR FRED JR	 "	2.2 NA	ME					•		
STREET ADORESS	2117 SE 10 TER		i i		ADDRESS						
CHTY-ST-ZIP	CAPE CORAL FL		2.40		ľ						
HILF	STD	DELETE						Ch	ange	Additi	
NAME	AMES, JEROME J. SR		3 2 NA	AME							
STREET ADDRESS	1012 DOLPHIN DR		33 51	REET	ADDRESS						
CITY - ST - ZIP	CAPE CORAL FL		3.4 CI	ITY-S	T-ZIP						
TITLE		☐ DELETE			·			Ch	ange	Additi	
NAME			4. 2 N	AME							
STREET ADDRESS											
			4.3 ST	REET	ADDRESS						
CITY-ST-ZIP			4.3 ST 4.4 CI								
		DELETE	4.4 G)	TY-SI				Ch	inge	Addition	
TITLE		DELETE	4.4 Ci	TY-SI TLE			· · · · · · · · · · · · · · · · · · ·	Ch	inge	Additi	
TITLE NAME		DELETE	5.1 TI) 5.2 NA	TY-ST TLE AME				Ch;	ınge	☐ Addition	
TITLE NAME STREET ADORESS		☐ DELETE	5.1 TI) 5.2 NA	TY-ST TLE AME TREET	T-ZIP ADDRESS			Ch	inge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI	TY-ST TLE AME TREET TY-ST	T-ZIP ADDRESS			Ch	-		
TITLE NAME STREET ADDRESS CITY-ST-712 TITLE		_	4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI	TY-ST TLE AME TREET TY-ST TLE	T-ZIP ADDRESS				-	Additio	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		_	4.4 CI 5.1 TII 5.2 NA 5.3 ST 5.4 CI 6.1 TII 6.2 NA	TY-ST TLE AME IREET TY-ST TLE AME	T-ZIP ADDRESS				-		

14. I do 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 inclicated 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 on an attachment with an address.