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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K31161

K-C SHEET METAL INC.

Principal Place of Business Mailing Address									
907-B SE 13 PL CAPE CORAL FL 33990		907-B SE 13 PL CAPE CORAL FL 33990							
						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			1
						08/17/1988			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For			
21		26				65-0068813	N ₁	ot Applicable	-
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	,	Additional	1
22		27						equired	-
City & State		City & State			6. Election Campaign Financing		May Be		
23		28				Trust Fund Contribution		to Fees	1
Zip	. Country	Zip	Cour	ntry		8. This corporation owes the current year	ar Intangible Yes	₽Ńo	
24	25	29 30	0			Personal Property Tax. 10. Name and Address of New Registe			1
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registr	- Cu Agom		1
CBO	UCH, DUANE L		ĺ						-
			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			}	
	I SE 10TH ST E CORAL FL 33990		-	83		THE PROPERTY OF SHIPE FAMILY	建设施 机	1.4:20:186	1
OA	E 0011/12 1 2 00000					· 1967年6月1日 中華 1968年1月1日	231 343 1 225 3 3 4 4	10 32 05	-
				84	City	東京 の機能を 1700 1870 またい まんだ 1880 1881	FL 85 Zip	Code	
44 5	4. the residence of Continue 607.05	02 and 607 1508. Florida Statutes	the al	ove-	named corp	arction submits this statement for the nurno	se of changing it:	s registered	1
					ne corporation	on's board of directors. I hereby accept the a	ippointment as re	egistered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	ia Statt	nes.					
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: R	egistered	Agent s	signature required	d when reinstating) Gardin DAT			」 ໔
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER			1 80
TITLE	VD	☐ DELETE	1.1 TI	ľΕ		39-7. 38 3 13	☐ Change	Addition	5
NAME	CROUCH, DUANE LEE		1.2 NA	ME					5
STREET ADDRESS	1804 SE 10 ST		1.3 ST	REETA	DDRESS				ļ
CITY-ST-ZIP	CAPE CORAL FL		1.4 CI	TY-ST-	ZIP	<u> </u>			Į þ
TITLE	PD	☐ DELETE	2.1 TI	ΓLE			☐ Change	Addition	`
NAME	KEIM, ARTHUR FRED JR		2.2 NA	ME					
STREET ADDRESS	A		2.3 ST	REETA	NDDRESS	•	•		
CITY-ST-ZIP	CAPE CORAL FL		2.4 C	ITY-ST	ZIP			· · · · · · · · · · · · · · · · · · ·	-
TITLE		☐ DELETE	3,1 Tr	ΠE		سندن في المنظم ا	☐ Change	Addition	=
NAME			3.2 N	AME		- September 1991 (1991 - 1992)			
STREET ADDRESS			3.3 ST	REET	ADDRESS	计数据 海绵 海绵线	经抵款管	中型的制度	1
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,		-	TY-ST	-ZIP		- ☐ Change	Fig. 7 c	_
TITLE		☐ DELETE	4.1 TI			e e for a filt of a e e e for a constant	Change	F. [14] Addition	1
NAME			4.2 N	AME					
STREET ADDRESS	1		4.3 S	REET	ADDRESS				
CITY-ST-ZIP			-	TY-ST-	ZIP		☐ Change	Addition	1
TITLE		DELETE	5.1 TI			4 600	, Cubude		
NAME			5.2 N		AODDEGE				1.
STREET ADDRESS	3				ADDRESS				
CITY-ST-ZIP		☐ DELETE	5.4 C	TLE	-217		☐ Change	∋ ☐ Addition	<u>, </u>
TITLE			6.2 N					_	
NAME					ADDRESS		•		
STREET ADDRESS	S ··			MY-ST-					
CITY OT ZID	· ·		0.40	111-01-			· · · · · · · · · · · · · · · · · · ·		

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 on an attachment with an address, with all other like empowered.

FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90052 043 ***150.00