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FILED

Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K49082

(6)

1. Corporation Name

SOUTHERN PRESTRESSED, INC.

Principal Place of Business

128 AIRPORT BLVD.  
PENASACOLA FL 32513

Mailing Address

1260 TURRET DR  
ROCKFORD IL 61115  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/01/1988

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2919444

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

City & State

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

23

28

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

24

25

Country

29

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FULLER, JEFFREY  
C/O FULLER, SWINDLE & HOLTONBACK  
100 NORTH TAMPA STREET SUITE 2650  
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

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 registered 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 the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
D KORHONEN, ARTO  
STREET ADDRESS  
128 AIRPORT BLVD  
CITY - ST - ZIP  
PENASACOLA FL

TITLE ☐ DELETE

NAME  
P BEATTY, GEORGE T  
STREET ADDRESS  
1260 TURRET DR  
CITY - ST - ZIP  
ROCKFORD IL

TITLE ☐ DELETE

NAME  
S BELL, IRA  
STREET ADDRESS  
200 DEFENSE STREET #2100  
CITY - ST - ZIP  
CHICAGO IL

TITLE ☐ DELETE

NAME  
T SJOROOS, KIMMO  
STREET ADDRESS  
1260 TURRET DR  
CITY - ST - ZIP  
ROCKFORD IL

TITLE ☐ DELETE

NAME  
D HORSTIA, HEIKKI  
STREET ADDRESS  
128 AIRPORT BLVD  
CITY - ST - ZIP  
PENASACOLA FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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.

SIGNATURE:

SIGNATURE REQUIRED Kimmo Storoos Jan 23, 1998 815 6548300

CR2E034 (10/97)