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 # K82150

1: Corporation Name

MOODY'S SHEET METAL WORKS, INC.

							#400 Block Block of	#11 01011 \$1011 1001	
Principal Place	e of Business	Mailing Address							
858 MASON AVE. 858 MASON AVE.									
DAYTONA BEAC	CH FL 32117	DAYTONA BEACH FL 32117				DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		·	
						04/20/1989			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For	
<u> </u>	ace of business	26				59-0932665	Not Applicable		
21 Suita Ant	# 010	Suite, Apt. #, et	<u> </u>		 -		\$8.7	5 Additional	
Suite, Apt.	#, etc.	27				5. Certifcate of Status Desired		e Required	
City & State		City & State				6. Election Campaign Financing	\$5	00 May Be	
<u></u> -	5	28				1	Trust Fund Contribution Added to Fees		
Zip	Country	Zip Country				8. This corporation owes the current year Intangible			
└	25 29 30			,		Personal Property Tax.	Yes	□No	
24	9. Name and Address of Curre			T		10. Name and Address of New Regis	tered Agent		
	5. Name and Address of Garte	it regiotore rigoni		81	Name				
FRAS	SER, PENNY MOODY			Ш					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MUDDY CREEK LANE	•		82	Street Ac	ddress (P.O. Box Number is Not Acceptable)			
	OND BCH. FL 32174			83				,	
011111	OND BOTH TE GETT							1 1 1	
				84	City		FL 85 2	Zip Code (
			<u> </u>	<u> </u>		proporation submits this statement for the purpostion's board of directors. I berefy accept the	, ,	a its registered	
office or r	egietered agent or both in the State	of Florida, Such change	was autno	nizea ov	the corpora	ation's board of directors. I hereby accept the	appointment a	s registered	
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.050	05, Florida	Statutes	•				
SIGNATURE							ATE.		
	Signature, typed or printed name of registered age		(NOTE: Regi		t signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICE		CTORS IN 12	
12.		ND DIRECTORS	ETE	13.		ADDITIONS/GITANGES TO GITTIGE	Char		
ΠLE	D		-''-	1.2 NAME				_	
NAME	FRASER, PENNY MOODY								
STREET ADDRESS	392 MUDDY CREEK LANE			1.3 STREET					
CITY+ST-ZIP	ORMOND BCH. FL			1.4 CITY-S	T- ZIP	- H	Chai	nge Additio	
TITLE	P	☐ DELI	215	2.1 TITLE	ł			iigo 🗀 i iaanaa	
NAME	MOODY, WILLIS B		ı	2.2 NAME					
STREET ADDRESS	261 PARULLI DR			2.3 STREET	TADDRESS				
CITY-ST-ZIP	ORMOND BCH FL			2.4 CITY-S	ST-ZIP		☐ Chai	nge	
TITLE .		☐ DEL	ETE	3.1 TITLE			□ Cila	ngeAdditio	
NAME	•			3.2 NAME					
STREET ADDRESS	·		1	3.3 STREE	T ADDRESS				
CITY-ST-ZIP				3.4. CITY-S	T-ZIP				
TITLE		☐ DEL	ETE	4.1 TITLE			Cha	inge Additio	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	TADDRESS				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				
TITLE		☐ DEL	ETE	5.1 TITLE			☐ Cha	nge 🔲 Additio	
NAME				5.2 NAME	1				
STREET ADDRESS				5.3 STREE	T ADDRESS				
CITY-ST-ZIP	1.			5.4 CITY-S	T-ZIP				
TITE C'	7847 7 3 4 4 4 3 3	☐ DEL	ETE	6.1 TITLE	-		☐ Cha	ange 🗌 Additio	

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, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

STREET ADDRESS

FILED

Jan 21, 1999 8:00am

Secretary of State

01-21-1999 90013 026 ***150.00