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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K9556

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(7)

FILED Jan 28 1998 8:00am Secretary of State

MISCEL	Laneous sheet metal	., INC.						
						L LEGICE LING COLOR AND COLOR AND COLOR COLOR COLOR COLOR		ALAK ALAK NAAL
					·			
Principal Place	e of B usiness	Mailing Address	Mailing Address				1810 8180	41311 41511 1841
2036 JERNIGAN RD 2036 JERNIGAN RD								
JACKSONVILLE FL 32207 JACKSONVILLE FL 3220			207			DO NOT WRITE IN THIS S	PACE	
						3. Date Incorporated or Qualified		·
						06/14/1989		
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				59-2953806		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional
22		27				5. Certificate of Status Desired	Fee	Required
City & State	9	City & State				6. Election Campaign Financing		00 May Be
23		Zip Country				Trust Fund Contribution		ed to Fees
Zip				ntry		8. This corporation owes or has paid the curr	ent year Yes	
24	[25] g. Name and Address of Curre	29 29 Agent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered A		∐ No
IN	RDAHL, JOY A. ESQ	ART HOBISTOTO AGOIN		81	Name	IO. Hamb and Addition of High Hogistoled A	Bour	
	10-4 WILLIAMSBURG PARK BL\	.m						
JACKSONVILLE FL 32257				62	Street Add	ress (P.O. Box Number is Not Acceptable)		
Unic	ONGONVILLE I'L GEED?		ŀ	83				
				84	City	FL	85 Z	ip Code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607,1508, Florida Sta	atutes, the ab	ove-i	named corr		L.L.L. Changin	a its reaistered
office or re	egistered agent, or both, in the States the child	e of Florida. Such change wa	as authorized	by t	he corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appo	intment	as registered
	The Times With a to accopt the con	gations of, decition dov. 0000,	1 IOIIGE GIER	J.C.3.				
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable (I	NOTE: Registered	Agent	signature requi	ited when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12
TITLE	PD OVEROGRADIL WEARINGTHAN			LE		l	Chang	je 🔝 Addition
NAME	OVERCASH, KENINETH W.		1.2 NAME					
STREET ADDRESS	2036 JERNIGAN RD		1.3 STREET ADDRESS		DORESS			
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CITY - ST - ZIP				
TITLE	OVEDCACH V CHEDVI	☐ DELETE	2.1 TIT			L	Chang	je 🗌 Addition
NAME	OVERCASH, V. CHERYL 2036 JERNIGAN RD		2.2 NA					
STREET ADDRESS	JACKSONVILLE FL				DDRESS			
CITY-ST-ZIP TITLE	D	DELETE	2.4 CHY TE 3.1 TITLE		ZIP		Chano	e Addition
NAME	OVERCASH, V. CHERYL		3.1 IIII					e 🗀 Addition
STREET ADDRESS	2036 JERNIGAN RD				DDBESS			
CITY-ST-ZIP	JACKSONVILLE FL			3.3 STREET ADDRES				
TITLE		DELETE		4.1 TITLE			Chang	e Addition
NAME				4. 2 NAME		•		
STREET ADDRESS				4.3 STREET ADDRESS				
CITY-ST-ZIP			1	4.4 CiTY - ST - ZIP				
TITLE		DELET E		5.1 TITLE			Chang	e Addition
NAME			5.2 NA	5.2 NAME			•	
STREET ADDRESS				5.3 STREET ADDRESS				
CITY-ST-ZIP				5.4 CITY - ST - ZIP				
TITLE		☐ DELETE		6.1 TITLE			Chang	e
NAME			6.2 NA	ME				
STREET ADORESS			6.3 STR	EET AD	DDRESS			
CITY-ST-ZIP			6.4 CIT	Y-S1-2	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.

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