

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

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Secretary of State

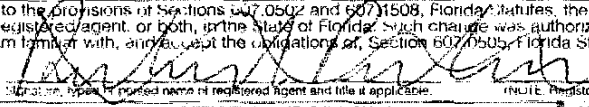
PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # L23321 (7) 1. Corporation Name PERLEN STEEL CORP.		



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O RICHARD PERLEN 1000 W ISLAND BLVD. T507 WILLIAMS ISLAND FL 33160		Mailing Address C/O RICHARD PERLEN 1000 W ISLAND BLVD. T507 WILLIAMS ISLAND FL 33160	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 10/17/1989	4. FEI Number 22-3019334
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	Applied For ☐ Not Applicable ☐
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$8.75 Additional Fee Required
23. Zip	28. Zip	7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No	\$5.00 May Be Added to Fees
24. Country	25. Country	8. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent PERLEN, RICHARD 1000 WEST ISLAND BLVD. T507 WILLIAMS ISLAND FL 33160		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. 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 agent 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:  DATE: _____
(Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	PERLEN, RICHARD	1.2 NAME	
STREET ADDRESS	1000 W ISLAND BLVD T507	1.3 STREET ADDRESS	
CITY-ST-ZIP	WILLIAMS ISLAND FL	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(b), 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:  Richard Perlen 1/12/98 305-692-9023

CR2E034 (10/97)