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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

(1)

OAK TREE FABRICATION, INC.

Proced Place of Business 700 HGHWAY 37 SOUTH MULBERRY FL 33800								ALLI BIRK BARN BIX		
2. Principal Place of Euronose 2a. Making Address 2a. Making Addre	Principal Place of Business Mailing Address									
Principal Piace of Exempts 2a Mating Asshoras 4. FET FET S9 3005538 Applied For Not Applicable S9 3005538 Not Applicable Not Applicable S9 3005538 Not Applicable Not Applicable S9 3005538 S0 300549 S9 300549 S0 30054										
Second content of Status Desired Second Status Desired Second Seco							1 ' ' '	3a. Date of 05/1	Last Report 6/1995	
Second content of Status Desired Second Status Desired Second Seco	2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Applied	For
27	21		26				59-3005538		Not App	plicable
27		#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$		
20	22								Fee Require	∌đ
20		•	·					П		
Name and Address of Current Registered Agent		Country	· · ·							
## HOLT, J.M. TOTO HIGHWAY 37 SOUTH MULBERRY FL 33860 11. Pursuant to the provisions of Sections 607 0502 and 607 1506. Foolds Statutes, the above harmed composition's board of directors. Throuby accept the appointment are registered agent, or both, in the State of Florics Statut. Plans and accept the objection of collegators of, Section 607 0505. Foolds Statutes, the above harmed composition's board of directors. Throuby accept the appointment are registered agent. Plans SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 14. CITY TO THE TOWN Y 37 S. MULBERRY FL 15. TABLE 1 THRE 10. THRE 10. THRE 1 DELETE 1 THRE 27. THRE 1 THRE 2. THRE 2. THRE 2. THRE 2. THRE 3. THRE		 	— n	, <u></u>						
HOLT, J.M. 7070 HIGHWAY 37 SOUTH MULBERRY FL 33860	27									
## City			Trogistores rigoni		81	Name	10, Name and Address of New A	egistered Age	111	
## Street Address (P.O. Box Number is Not Acceptable) ## Street Address (P.O. Box Number is Not Acceptable) ## Addition ## Bit	HOLT, J	l.M.								
1. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes. The above named corporation submits this statement for the purpose of changing its registered office framities with and accept the obligations of, Section 607.0506, Florids Statutes.					82	Street Add	ess (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes. The allower named corporation submiss this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida Succi. change was authorized by the corporation's board of directors. It herotally accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 637, 050006, Florida Statutes. Signature S	MULBER	RRY FL 33860			83					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes. The allower named corporation submiss this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida Succi. change was authorized by the corporation's board of directors. It herotally accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 637, 050006, Florida Statutes. Signature S										
Change					84	City		EI 8	5 Zip Code	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	familiar wit	ed agent, or both, in the State of Fiori th, and accept the obligations of, Sect	da Such change was authoriz tion 607.0505, Florida Statutes	red by the d s.	oorp	oration's boa	rd of directors. I hereby accept the appo	intment as reg	ng its registere stered agent.	xd office Lam
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

CITY - ST - ZIF

SIGNATURE: J. M. HOLT SIGNING OFFICER OR DIRECTOR

1-8- 96

428-2282