ANNUAL REPORT 1999  FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS				FILED co <i>t</i> en -a PH 5: 00		
FILING FEE Annual Report \$100 \$188.75 Make Check Payal 1. Name and Mailing Address of Limited Liability Company	ole To: FLOR		T OF STATE	<u>.</u>	MEWA	
K + S Forming, L. L.C. 5845 Jucaranda Dr. Mableton, GA 30126				1a. Principal Place of Business Address 5845 Jacaranda Dr Mableton GA 30124		
2 Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip Country	2a. Mail Suite, Aç City & Si		ity	3. Date Organize  5 - 2 C  4. FEI Number  6 5 - 0  5. Date of Last F	0-98 84784	3a. State of Formation  Florida  Applied For  Not Applicable  6. Certificate of Status Desired  \$6 75 Additional Fee Required
Ruth G. Rei Apt. 109, 166 Ft. Myers, F  9. Pursuant to the provisions of Sections 608 its registered office or registered agent, or both, as registered agent, and accept the obligation	O Pine.  416 and 608 508 in the State of Flo	907	Street Address (P 173 Suite, Apt #, etc City Wi'Mer	tive vote of a majorit	FL  ubmits this state y of the member	Zip Code 3 38 8 4 ement for the purpose of changing s Thereby accept the appointment
SIGNATURE Report of Agentas	TIE Haysani i Aşeri signidra inclinativa i lan silataji			DATE 4/1/99		
Managing Members/Man MGRM John J. Snic MGRM Panela W. Sa	ler	5845 JC 5845 JC		a dr	Mable Mable -14/16 *****1	State and Zip Code  For GA 30124  Stan GA 30124  St

4/1/99 4046991947

SIGNATURE: John John John Company of Signature of Signatu

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