2005 FOR PROFIT CORPORATION ANNUAL REPORT



FILED Apr 25, 2005 8:00 am Secretary of State

DOCUMENT # M30902 1. Entity Name R & R STEEL FABRICATOR & ERECTOR CORPORATION					04-25-2005 902/1 014 ****150.00					
Principal Place of Business 5603 NW 8TH STREET MARGATE, FL 33063 US		Mailing Address 5603 NW 8TH STREET MARGATE, FL 33063 US		~UU46387						
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03262005	Chg-P	CR2E034 (1	0/03)		
City & State		City & State			4. FEI Number 59-2673			_	plied For t Applicable	
Zip	Country	Zip			5. Certificate of	f Status Desired		5 Add lequired	itional	
	6. Name and Address of Current	Registered Agent			7. Name and /	ddress of New R	egistered Agent			
STERK, RICHARD M., SR.				Name	ame Ireet Address (P.O. Box Number is Not Acceptable)					
5603 NW 8TH STREET MARGATE, FL 33063				Street Address	S (P.U. Box Number	is Not Acceptable	·)			
				City	• •		FL Z	ip Code	3	
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.									and accept	
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					5.00 May Be					
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	ICERS AND DIRE	CTORS	S IN 11	
title Name Street address	STERK, RICHARD M., SR.		THE NAM STOO		☐ Change ☐ Addit				☐ Addition	
CITY-ST-ZIP	DEERFIELD, FL			-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STERK, RICHARD JR. 1619 SE 8 AVE DEERFIELD BCH, FL	□ Delete					<u>□</u> c	hange	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete		1	I			□ €	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		I				hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		ı			c	hange	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		i			c	hange	Addition	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.