

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000093586

1. Entity Name

ARCHER STEEL FABRICATORS, INC.



Principal Place of Business
3770 NW 16 STREET
LAUDERHILL FL 33311

Mailing Address
242 SW 58TH AVE.
PLANTATION FL 33317



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 65-1045252

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRAYMAN, CONRAD R
242 SW 58TH AVE.
PLANTATION FL 33317

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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.

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, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

P/S
BRAYMAN, CONRAD R
242 SW 58TH AVE.
PLANTATION FL 33317

TITLE NAME ☐ Delete

VPT
BRAYMAN, GAIL A
242 SW 58TH AVE.
PLANTATION FL 33317

TITLE NAME ☐ Delete

S
BRAYMAN, ROBERT D
3770 NW 16 STREET
LAUDERHILL FL 33311

TITLE NAME ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE NAME ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE NAME ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

U000000601486
01/26/07-80052-003 150.00

TITLE NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE NAME ☐ Change ☐ Addition

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CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: Conrad R. Brayman *President* **1-22-07** **954-791-3771**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #