2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State

DOCUMENT # P0200050354 1. Entity Name STEEL ERECTION TEAM, INC.							04-18-2008	90049 02:	3 ***167	⁷ .50
Principal Place 2377 N.W. 23 LAWTEY, FL	Mailing Address 2377 N.W. 238TH STR LAWTEY, FL 32058	REET					il keta l a hfi abi a	a IIIBI Shii Ris	(PS) (4 (BB)	
Principal Place of Business - No P.O. Box # 3. Mailing Address					\dashv					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03202008	Chg-P	CR2E03	4 (12/06)	
City & State	•	City & State			4. FEI Number 03-0440065		= "	Applied For Not Applicable		•
Zip	Country	Zip	Coun	itry		5. Certificate	of Status Desired		8.75 Add ee Required	
	6. Name and Address of Current	Registered Agent	1		-	7. Name and	Address of New F	Registered A	jent	
HARDY, D 403 WEST STARKE, F		Street Addr	ress (P.	A E・Q O. Box Numb 43 かん	RIFFU er is Not Acceptabl ンマシザ AVE	e) 5 .				
	4		•	City	Mail	DTEY,		FL	Zip Code	
	named entiti submits this statement fonce or registered agent			ed office or reg	egistered	d agent, or bo		orida, 1 am fa		
SIGNATURE_	Signature typed or printed name of registered agen	t and title if applicable. (NO	TE: Registere	d Agent signature re	required w	rhen reinstating)	4:	DATE		
	E NOW!!! FEE IS \$150.00 by 1, 2008 Fee will be \$550 OFFICERS AND					May Be d to Fees	/CHANGES TO OF	FICERS AND I	DIRECTOR:	S IN 11
TITLE	PTD	Delete	1111	· · · · · · · · · · · · · · · · · · ·		ADDITIONO	7011-111020 10 011		☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	GRIFFIS, RICHARD B 2377 N.W. 238TH STREET LAWTEY, FL 32058	Decae	NAM STRI							
TITLE NAME STREET ADDRESS CITY-ST_ZIP	V SPROW, KEVIN C 23058 NW 41ST AVENUE LAWTEY, FL 32058	Delete							Change	☐ Addition
TITLE NAME STREET ADDRESS	S GRIFFIS, WANDA E 2377 N.W. 238TH ST.	☐ Delete		AE EET ADDRESS					☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	LAWTEY, FL 32058	□ Delete	TITU NAM STR	AE EET ADDRESS					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITL NAM STR						Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY	AE EET ADDRESS Y-ST-ZIP					☐ Change	Addition
12. I hereby of indicated of the corchanged,	certify that the information supplied wi on this report or supplemental report poration or the receiver or trastee en or on an attachment with an articles	th this filing does not qualify its true and accurate and that powered to explute this report, with all other like empowered	for the ex my signa rt as requ d.	emptions contained by Chapte	ntained i ve the sa ter 607	in Chapter 11 ame legal effe Florida Statut	9, Florida Statutes, ct as if made under es; and that my nar	I further certil oath; that I ar ne appears in	y that the in the an officer Block 10 o	nformation or director r Block 11 ii