2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000009274

BAR BUILDERS STAINLESS OF FLORIDA INC.



FILED Aug 14, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

4100 NORTH POWERLINE ROAD

4100 NORTH POWERLINE ROAD

#B-1

POMPANO BEACH, FL 33073 POMPANO BEACH, FL 33073



DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN	THIS	SPACE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/05) 08082006 No Chg-P Applied For 4. FEI Number 02-0672705 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

OSTERHOUT, ROBERT F 4100 NORTH POWERLINE ROAD POMPANO BEACH, FL 33073

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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. Profile Registered Registered agent. Register Town Right Town 17 2006.									
SIGNATURE KIND FOR THE Signature, typoed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE									
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
10.	OFFICERS AND DIRE	CTORS							
TITLE NAME STREET ADDRESS CITY-S1-ZIP	PD OSTERHOUT, ROBERT F 4100 N POWERLINE RD, # 84 POMPANO BEACH, FL 33073				U00000574345 08/14/06-80011-008 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD OSTERHOUT, CLAUDIA J 4100 N POWERLINE RD, # 84 POMPANO BEACH, FL 33073								
NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE				
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 received 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 multipall pher fixe empowered.									