

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P14793** (4)

1. Corporation Name
FLOUR CITY ARCHITECTURAL METALS, INC.

Principal Place of Business 915 RIVERVIEW DR SUITE 1 JOHNSON CITY TN 37601 US	Mailing Address 915 RIVERVIEW DR SUITE 1 JOHNSON CITY TN 37601 US
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/10/1987	Applied For ☐ Not Applicable
4. FEI Number 25-1468221	
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

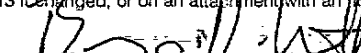
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	RUSSO, MICHAEL J	1.2 NAME	
STREET ADDRESS	915 RIVERVIEW DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	JOHNSON CITY TN	1.4 CITY-ST-ZIP	
TITLE	S ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	TANG, JOHN W.Y.	2.2 NAME	
STREET ADDRESS	610 NATHAN RD., SUITE 1301	2.3 STREET ADDRESS	
CITY-ST-ZIP	MONGKOK KO	2.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WILLIS, BRYAN R	3.2 NAME	
STREET ADDRESS	915 RIVERVIEW DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	JOHNSON CITY TN	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: 

REQUIRED

1/26/98

423-928-2724

CR2E034 (10/97)