

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P24145

1. Corporation Name SKW-MBT SERVICES, INC.

MASTER BUILDERS OF DELAWARE, INC.

Principal Place of Business

23700 CHAGRIN BLVD.  
CLEVELAND OH 44122-5506

Mailing Address

23700 CHAGRIN BLVD.  
CLEVELAND OH 44122-5506

2. Principal Place of Business

21 23700 CHAGRIN BLVD

2a. Mailing Address

26 23700 CHAGRIN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

05/03/1989

4. FEI Number

34-1469000

Applied For

Not Applicable

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 the current year Intangible  
Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

NAME KOEHLER, TRUMAN  
STREET ADDRESS 23700 CHAGRIN BLVD.  
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ DELETE

NAME BOMBEI, GARY V.  
STREET ADDRESS 23700 CHAGRIN BLVD.  
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ DELETE

NAME AS  
KEHR, DONALD  
STREET ADDRESS 23700 CHAGRIN BLVD  
CITY-ST-ZIP CLEVELAND OH

TITLE ☒ DELETE

NAME V  
LOGAN, JOHN A.  
STREET ADDRESS 23700 CHAGRIN BLVD.  
CITY-ST-ZIP CLEVELAND OH

TITLE ☐ DELETE

NAME PD  
SHYDLOWSKI, L MICHAEL  
STREET ADDRESS 23700 CHAGRIN BLVD  
CITY-ST-ZIP CLEVELAND OH 44122

TITLE ☐ DELETE

NAME S  
VINCOUR, PETER A  
STREET ADDRESS 23700 CHAGRIN BLVD  
CITY-ST-ZIP CLEVELAND OH 44122

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Director  
Dieter Boech  
1.3 STREET ADDRESS Dr. Albert Frank Str. 32  
1.4 CITY-ST-ZIP Trostberg, D 83308 Germany

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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)(i), 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, with all other like empowered.

SIGNATURE:

*Peter Vincour*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99  
Date

216-831-5500 ext 2027  
Daytime Phone #

CR2E034 (1/98)