

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

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90039 023 ***150.00

DOCUMENT # P28493

1. Corporation Name

FRU-CON ENGINEERING INC.

Principal Place of Business

15933 CLAYTON RD.
BALLWIN MO 63011

Mailing Address

15933 CLAYTON RD.
BALLWIN MO 63011

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/13/1990

4. FEI Number

43-0280556

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

9. Name and Address of Current Registered Agent

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

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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

☐ DELETE

NAME

WALLACE, CHARLES E

STREET ADDRESS

1817 WOODMOOR RIDGE DRIVE

CITY-ST-ZIP

BALLWIN MO 63011

TITLE

VT

☐ DELETE

NAME

MEYER, RICK

STREET ADDRESS

11326-F POINTE SOUTH DR.

CITY-ST-ZIP

ST LOUIS MO

TITLE

D

☐ DELETE

NAME

SAUER, PAUL H

STREET ADDRESS

16183 WILSON MANOR DR

CITY-ST-ZIP

ST. LOUIS MO

TITLE

VD

☐ DELETE

NAME

KEHRER, DAVID L.

STREET ADDRESS

21 CARRIAGE WAY, WEST

CITY-ST-ZIP

ST. PETERS MO

TITLE

S

☐ DELETE

NAME

RUZICKA, LEONARD R.

STREET ADDRESS

1947 SUNNY DR.

CITY-ST-ZIP

KIRKWOOD MO

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.073(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 a power of attorney.

SIGNATURE:

Charles Gilbert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/99 (314) 391-4560

Date

Daytime Phone #

CR2E034 (1/98)