FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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DOCUI 1. Corporation	MENT # P3294 5	3	(3)								
MIDWEST INDUSTRIAL CONTRACTORS, INC.											
									813 (en 8).		IJ BIAN AJAN JARI
D: 1 (E)											
,	Principal Place of Business Mailing Address				E D B 1111 B 11	an aran alau £i£	IL AFDII DIQII INDI				
P.O. BOX 580128 10701 E. UTE ST.											
TULSA OK	74130		TULSA OK 74116 US								
ŀ			00					e incorporated or Qualified	3a.	Date of Last F	•
2 Principal Di	ace of Business	~1~ 5 =						02/22/1991		04/18/19	995
21 Principal Pi	ace of Business		Mailing Address					Number			Applied For
727		······································				73-1367986			Not Applicable		
22	Grand, Annual Co.						tificate of Status Desired		•	Additional Required	
City & State City & State			· · · · · · · · · · · · · · · · · · ·			ction Campaign Financing			·····		
23		28						st Fund Contribution			May Be
Zip	Country		Zip	Count	ry		8. This	corporation has liability for	intangib		
24	25	29		30			Flor	ida Statutes 💢 Ye	s 🔲 No	0	,
	9. Name and Address of Current	Regist	ered Agent		1	Name	10. Na	me and Address of New	Register	red Agent	
CT CO	RPORATION SYSTEM			0							
	. PINE ISLAND ROAD			8	2 3	Street Addr	ress (P.Ö. Ē	ox Number is Not Accepta	ble)		
	ATION FL 33324			8	3						
1 54117	WORLE GOOS				⅃						
]				8	4 0	City				85 Z	p Code
11. Pursuant to	o the provisions of Sections 607,0502 a	ind 607	.1508, Florida Statute	s, the above	L -nar	ned corpor	ration subm	its this statement for the pu			registered office
familiar wit	of the provisions of Sections 607,0502 a ed agent, or both, in the State of Florida h, and accept the obligations of, Section	i. Stich n 607.0	change was authorize 505, Florida Statutes.	ed by the cor	rpora	ation's boar	rd of directo	ors. I hereby accept the app	ointmen	t as registered	agent. I am
SIGNATURE											
12.	Signature, typed or printed name of registares again an			E: Bagistered Ag	ont s	gnature required			DAT		
TITLE	OFFICERS AND	DIFIE	TALDELETE	13.			ADE	ITIONS/CHANGES TO OFF	ICERS A		
NAME	HUGHES, CLAYTON W.		Z-OLCCIE	1.2 NAMS		I P	0	BAKER		[] Change	Addition .
STREET ADDRESS	4300 E. 36 STREET NORTH			1.3 STRS		عرار دار perce	من الا	36 STREET NOR	1		
CITY-ST-ZIP	TULSA OK			1.4 CITY		nin Ti	NOO E.	OK 74115	<i>H</i>		
TITLE	VD		DELETE	2 1 11118		" - 14	wer,	OK 14113		["] Change	Addition
NAME	ELLISON, LESLIE B.			2.2 NAME	<u>.</u>	A	MARK	MARTIN			7 todation
STREET ADDRESS	4300 E. 36 STREET NORTH			23 STREE	et adi	DRESS 43	MA E	21- STOCKT KIND	Tu		
CITY-ST-ZiP	TULSA OK			24 C/TY-		(P) 14	LSA. C	36 STREET NOR 14115	ı fi		
TITLE	\$		DELETE	3. 1 THTLE				7.7.		Change	Addition
NAME	ALEXANDER, VERONA KIM			3 2 NAM8							
STREET ADDRESS	4300 E. 36TH STREET, N.			3.3 STRE	ET AD	DRESS					
CITY-ST-ZIP TITLE	TULSA OK		C Drietr	3.4 CITY-			- A			F-V	
NAME	LEE, C. WILLIAM		DELETE	4.11016			TD			Change	☐ Addition
STREET ADDRESS	10701 E. UTE STREET			4.2 NAME		e.	WILLIA	im lee			
CITY-ST-ZiP	TULSA OK			4 3 STREE		DRESS 10	101 E.	UTE STREET OK 74116			
TillE	D		DELETE	4.4 CITY - 5. 1 T.TLE		14	JOA, C	JL 74116		[] Change	C Addition
NAME	WEST, DOYL D.			5.2 NAME						Change	Addition Addition
STREET ADDRESS	10701 E. UTE ST.			5 3 STREE		ORESS					i
CITY-ST-ZIP	TULSA OK			5.4 CITY-							
TITLE			DELETE	6 1 TITLE						Change	Addition
NAME				62 NAME							
STREET ADDRESS				63 STREE	T ADE	DRESS					
CITY-ST-ZIP				6.4 C/TY-	ST-Z	iP					
■9. LGO hereb∨	certify that the information supplied with	h thie C	ling is voluntarily 4 main	book and its		-4 100 -					

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information incloaded 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.

GNATURE:

SECR. / TREAS. 4244

P188388822

Date 1999 OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: