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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

**BOX 20 ELLYSON INDUSTRIAL PARK** 

3081 COPTER ROAD



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

3081 COPTER ROAD

**BOX 20 ELLYSON INDUSTRIAL PARK** 

## DOCUMENT # P93000065430 (9)

ENTECH FABRICATION AND DESIGN, INC.

Mailing Address

**FILED** 

Feb 27 1998 8:00am

Secretary of State

PENSACOLA FL 32514					PENSACOLA FL 32514						DO NOT WRITE IN THIS SPACE			
											3. Date Incorporated or Qualified 09/15/1993			
2. Principal P	Place of Busi	noss		2a 26	2a. Mailing Address					4.	FEI Number <b>59-3201909</b>		<del></del>	pplied For lot Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.							\\\\		Additional
22]					27					Ь.	Certificate of Status Desire	°×		berlupe
City & State					City & State					6.	Election Campaign Financi	ng	\$5.00	May Be
23		<del></del> -	<del></del>	28	\$						Trust Fund Contribution		Added	to Fees
Zip 24		Country			Zip			Country		8.	This corporation owes or h	•		
24	o Name	25 and	Address of Currer	29	torod A	nont	30				Personal Property Tax due Name and Address of Ne			No
МО			<del></del>	it isogii	ioiou A		81	Name	10.	, Name and Address of Ne	w negistered	a Agent		
MOORE, STEVEN T 1180 N 19TH AVE														
PENSACOLA FL 32501									82 Street Address (P.O. Box Number is Not Acceptable)					
TEHONOODA TE OZOOT														
								84	City			FI	<b>85</b> Zip	Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes the shown named corneration submits this statement for the purpose of shorting the engineered														
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, typico	DI PIN	ted name of registered age	ol and tak	ktankiqa ti	n (NC	OTE Regist	ered Ap	ent signature re	required when	reinslating)	DATE		[
12.			OFFICERS AN	D DIHE				13.			ADDITIONS/CHANGES TO (		ND DIRECTO	RS IN 12
TITLE	P					DELFTE	1.	TITLE					Change	Addition
NAME	MOORE						1.5	NAME						
STREET ADDRESS	1180 N.					1.3 STREET AD		ADORESS						
CITY-ST-ZIP		X)UX	FL 32501				1.	CITY-5	ST-ZIP					1
TITLE	V					DELETE	2	TITLE					Change	☐ Addition
NAME			MICHAEL L				2.3	NAME.						1
STREET ADDRESS			REEN ROAD		2.			2.3 STREET ADDRESS						1
CITY-ST-ZIP	JUNESE	UHL	TN 37659					4 CITY-	ST-ZIP		<del></del>			
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STREET ADDRESS									ADDDESS					ļ
						6.3 STREET ADDR 6.4 City-St-Zip								1
CITY-ST-ZIP							6.4	CITY-S	1 - 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 suppliemental 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 red inverted inverted 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 attraction with an address.

SIGNATURE:

CRZE034 (10/97