SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of ≨tate

DIVISION OF CORPORATIONS

FILED

99 JUL 29 PM 3: 35

DOCUMENT # P9400051625 CUSTOM METAL INSTALLATIONS OF CENTRAL FLORIDA, I				Scone 53 PM 3: 35	
				SECRETARY OF STATE TALLAHASSEE. FLORIDA	
NC.			ı I	LIEBULGA DE ARAN ENDO ENDO ENDO ENDO ENDO ENDO ENDO END	(68)
""					
Principal Plac	e of Business	Mailing Address	**************************************	1 10 2110 DE 110 (DE 11 DE	1811
2010 EAST HWY 20		P O BOX 1741			
STE 4 HAWTHORNE FL 32640		HAWTHORNE FL 32640		DO MOT WOITE IN TIME COACE	
HAWTHORNE	-L 32640	US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
100				07/08/1994	- 1
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied Fo	-
21		26		59-3254864 Not Applie	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired 38.75 Addition	al
22		27		Fee Required	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution L Added to Fees	
Zip	Country	Zip 29	Country 30	This corporation owes the current year Intangible Personal Property.	
29	9. Name and Address of Curr		1301	10. Name and Address of New Registered Agent	
			81 Name		
LEE, JOSEPH A				tress (P.O. Box Number Is Not Acceptable)	
854 SR 20A			GZ Sheet Add	aress (F.O. box Number is Not Acceptable)	}
JOHNSON FL			83		
į			84 City	85 Zip Code	
L			July Sity	FL S Z COOK	
11. Pursuan	t to the provisions of sections 607.05	502 and 607 1508, Florida Statute	s, the above-named corporate	oration submits this statement for the purpose of changing its registered	!
agent. I	am familiar with, and accept the obl	igations of, section 607.0505, Flo	rida Statutes.	tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE					.
12.	Signature, typed or printed name of registered a	gent and title if applicable (NO AND DIRECTORS	TE Registered Agent signature red 13.	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	STD	DELETE	1.1 TOTLE	Change Ad	(
NAME	LEE, JEANIE W	C Dett ic	1.2 NAME	100002962391	
STREET ADDRESS	854 SR 20A		1.3 STREET ADDRESS	-08/17/9901066019	- (i
CITY-ST-ZIP	JOHNSON FL		14 CITY-ST-ZIP	****150.00 ****150.0	JO
TITLE	PD	DELETE	2 1 TITLE	Change Ad	dition
NAME	LEE, JOSEPH A		2.2 NAME		ŀ
STREET ADDRESS	854 SR 20A		2 3 STREET ADDRESS		}
CITY-ST-ZIP	JOHNSON FL		2.4 CITY-ST-ZIP		
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CITY-ST-ZIP		DELETE	34 CITY-ST-ZIP		all tions
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STREET ADVIRESS			63 STREET ADDRESS	1 10	j
CITY-ST-ZIP	1		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.

SIGNATURE:

eanie w. Lu

Jeanie W. Lee 07/12/99

(352) 481-4695

CUSTOM METAL INSTALLATIONS OF CENTRAL FL., INC. P.O. BOX 1741 ~ 2010 EAST STATE ROAD 20 ~ HAWTHORNE, FL. 32640 Phone 352-481-4695 ~ Fax 352-481-3877

July 14, 1999

Division of Corporations Document # P94000051625

lanie w. Lee

U

This letter is in request that the penalty assessed Custom Metal for filing late be abated. Mr. Lee had a major heart attack which in return resulted in management difficulties. Please except this letter as an apology for the inconvenience.

Sincerely yours,

Jeanie W. Lee