## 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 # P9400064495

AMERICAN BUILDINGS & CARPORTS MFG., INC.					
Principal Place of Business 11829 RHODINE ROAD RIVERVIEW FL 33569	Mailing Address 11829 RHODINE ROAD RIVERVIEW FL 33569				
	La Malline Address				

## **FILED** Feb 12, 1999 8:00am **Secretary of State**

02-12-1999 90024 043 \*\*\*150.00



				,				
Principal Place	of Business	Mailing Address						
11829 RHODINE ROAD RIVERVIEW FL 33569  11829 RHODINE ROAD RIVERVIEW FL 33569			DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualifed			
					08/29/1994			i
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	pplied For	
21	300 S. 235	26			59-3260184	N	ot Applicable	*.
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75	Additional	
22	,,, 0.0.	27			5. Certificate of Status Desired	Fee R	equired	ı
City & State		City & State		'	6. Election Campaign Financing	\$5.00	May Be	ı
23		28			Trust Fund Contribution	Added	to Fees	ı
Zip	Country	Zip	Cou	intry	8. This corporation owes the current year in			i
24	25	29	30		Personal Property Tax.	Yes	<b>≥</b> SNo	l
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	•	ł
	·			81 Name	•			
	GLER, LINDA			82 Street A	Address (P.O. Box Number is Not Acceptable)			l
	29 RHODINE ROAD					<u> </u>	<del>سر در زرد دید</del>	1
RIVE	RVIEW FL 33569			83	· · · · · · · · · · · · · · · · · · ·			l
				84 City		85 Zip	Code	l
				'	<u>Fl</u>	_		ĺ
	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga				corporation submits this statement for the purpose o oration's board of directors. I hereby accept the appo	f changing its intment as re	s registered egistered	
SIGNATURE					equired when reinstating) DATE			_
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: ND DIRECTORS	13.	Agent signature re	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	8
12.	D OFFICERS AI	DELETE	1.1 11	ПЕ	ADDITIONS/OFF/AUGED 18 ST. 1923/1937	☐ Change		3
TITLE	_		1.2 N	1				3
NAME	RIEGLER, LINDA			TREET ADDRESS				}
STREET ADDRESS	1							1 5
CITY-ST-ZIP	RIVERVIEW FL 33569	☐ DELETE	2,1 T	ITY-ST-ZIP		☐ Change	Addition	{
TITLE	D OCUZALEZ OFOROE	□ beceive	2.1 N			,		
NAME	GONZALEZ, GEORGE			TREET ADDRESS				Ì
STREET ADDRESS	11829 RHODINE ROAD							
CITY-ST-ZIP	RIVERVIEW FL 33569	☐ DELETE	2.40 3.1 T	CITY-ST-ZIP		Change	Addition	1
TITLE		□ VELLIL						
NAME	. 1:1		3.2 N	1				
STREET ADDRESS				TREET ADORESS				
CITY-ST-ZIP		☐ DELETE	3.4. 0 4.1 T	CITY-ST-ZIP		☐ Change	Addition	1
TITLE		□ pere⊥e					<del></del>	1
NAME				NAME				
STREET ADDRESS	<b>\</b>		1	TREET ADDRESS		: .	•	1
CITY-ST-ZIP				CITY-ST-ZIP	•	Change	Addition	1
TITLE		☐ DELETÉ	5.1 T					1
NAME .				IAME	·			1
STREET ADDRESS				TREET ADDRESS				.
CITY-ST-ZIP	j			XTY-ST-ZIP		☐ Change	Addition	┤ .
TITLE		☐ DELETE		TILE		☐ Criange	, Dynamon	
NAME				IAME				1
STREET ADDRESS			6.3 5	STREET ADDRESS				-
,	The second secon		■ a · •	NEW AT 71D				

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.

813-671-8808