

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

FILED  
May 14 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000071874 (9)  
1. Corporation Name  
M & R FABRICATIONS, INC.

Principal Place of Business 8544 103RD ST JACKSONVILLE FL 32210 US	Mailing Address 8544 103RD ST JACKSONVILLE FL 32210 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7735 West Beaver St Suite, Apt. #, etc.		2a. Mailing Address 26 7735 West Beaver St Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/28/1994	
22 City & State JAX FLA		27 City & State JAX FLA		4. FEI Number 59-3267898	
23 Zip 32220		29 Zip 32220		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Country Duval		30 Country Duval		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent CAPEHART, JAMES M 7735 WEST BEAVER STREET JACKSONVILLE FL 32220		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		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 CAPEHART, JAMES M <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPEHART, JAMES M	1.2 NAME	
STREET ADDRESS	7735 WEST BEAVER STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32220	1.4 CITY-ST-ZIP	
TITLE	D CAPEHART, ROSINA M <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPEHART, ROSINA M	2.2 NAME	
STREET ADDRESS	7735 WEST BEAVER STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32220	2.4 CITY-ST-ZIP	
TITLE	D CAPEHART, JAMES M JR <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPEHART, JAMES M JR	3.2 NAME	
STREET ADDRESS	7735 WEST BEAVER STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32220	3.4 CITY-ST-ZIP	
TITLE	D CAPEHART, HEATHER M <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAPEHART, HEATHER M	4.2 NAME	
STREET ADDRESS	7735 WEST BEAVER STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32220	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 Rosina M Capehart Vice Pres 1/3/98 583-9156

CR2E034 (10/97)