

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90175 046 ***150.00

DOCUMENT # P94000074440

1. Corporation Name

SHEET METAL SERVICES, INC.

Principal Place of Business

3500 SOUTH STREET
TITUSVILLE FL 32780

Mailing Address

3500 SOUTH STREET
TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/06/1994

4. FEI Number

59-3274072

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 - May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 1480 N. U.S. #1

Suite, Apt. #, etc.

2a. Mailing Address

26 P.O. BOX 177

Suite, Apt. #, etc.

City & State

23 TITUSVILLE, FLORIDA

Zip

32780

Country

25 U.S.A.

City & State

28 MIMS, FLORIDA

Zip

29 32754

Country

30 USA

9. Name and Address of Current Registered Agent

BANNISTER, JAMES C
3500 SOUTH STREET
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name

JAMES C. BANNISTER

82 Street Address (P.O. Box Number is Not Acceptable)

83 2223 FREEDOM AVENUE

84 City
MIMS

85 FL

Zip Code
32754

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

TITLE P ☐ DELETE

NAME APPELGATE, ROBERT F
STREET ADDRESS 7439 CAMIO AVE
CITY-ST-ZIP COCOA FL

TITLE VP ☒ DELETE

NAME MARTINEZ, ALEXANDER
STREET ADDRESS 915 S PARK AVE
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE VP ☒ DELETE

NAME TOSI, DANIEL W.
STREET ADDRESS 4105 SKYWAY DR
CITY-ST-ZIP COCOA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP ☒ Change ☐ Addition

1.2 NAME APPELGATE, ROBERT F.
1.3 STREET ADDRESS 5630 FRIENDLY STREET
1.4 CITY-ST-ZIP PORT ST. JOHN, FL.32927

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE President ☐ Change ☒ Addition

4.2 NAME ALLEN, THOMAS B.
4.3 STREET ADDRESS 1887 S. PINEDALE ROAD
4.4 CITY-ST-ZIP EDGEWATER, FLORIDA 32141

5.1 TITLE VP ☐ Change ☒ Addition

5.2 NAME BUTLER, WAYNE J.
5.3 STREET ADDRESS 6340 MANILA AVENUE
5.4 CITY-ST-ZIP COCOA, FLORIDA 32927

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)