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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUI	MENT # P95000 FABRICATION, INC.	0030335 (0)	ORPORATIO	ONS	4 40 4 10 24 1 25 24 1 25 24 25 24 25 25 25 25 25 25 25 25 25 25 25 25 25	(1 Ba ll i avita ((I)	Jr 4111 1881
Principal Place of Business Mailing Address					1 100 100 100 100 100 100 100 100 100 1	., 481,11 48,184 1	tree Minn tered ter	
8920 LIGHTER KNOT DR 8920 LIGHTER KNOT DR LAKE WALES FL 33853 LAKE WALES FL 33853								
TAKE MALES	rL 33003	LANE WALES PL 33033			DO NOT WE	RITE IN THIS	S SPACE	
					Date Incorporated or Qualifi	ed		
A. Delevis of D	lace of Business	No. Mailing Address			04/13/1995 4. FEI Number			and the second
2. Philicipal P 21	jace of eusiness	2a. Mailing Address 26			65-0581307		———	plied For of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	
22		27			5. Certificate of Status Desired		Fee Re	
City & State	e	City & State			6. Election Campaign Financin	g	\$5.00	
23		28			Trust Fund Contribution		Added	
Zip	Country	Z ₁ p	Country 30	,	This corporation owes or had Personal Property Tax due J	-		angibte ∄No
24	25 Name and Address of Current		201 -		10. Name and Address of New			7 140
NE	WMAN, JACK C JR.		B1	Namo			 -	
8920 LIGHTER KNOT DR				Street A	Address (P.O. Box Number is Not Acce	ntable)		·
LAKE WALES FL 33853			82	OHOU!	August 11 (o. Box 14 miles is 14 mee			
			83					
			84	City			85 Zip	Code
···				1		F		
SIGNATURE	egistered agent, or both, in the State of mamiliar with, and accept the obligations of the state of signature agents.				corporation submits this statement for to oration's board of directors. I hereby as equired when relistating)	DATE	opointment as	registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO O	FFICERS AN		
TITLE	P	☐ DELFTE	1.1 TITLE	Į,	DYLL D VILL		L] Change	Addition
NAME	NEWMAN, JACK C JR.		1.2 NAME	þ	Bobby D. KING	A. W	enuo	•
STREET ADDRESS	8920 LIGHTER KNOT DRIVE		1.3 STREET		110 -5005 11102	F	7333	73
CITY - ST - ZIP	LAKE WALES FL 33853 ST	DELETE	1.4 CITY-S 2.1 TITLE	T- ZIP	cara mas	10	Change	☐ Addition
NAME	NEWMAN, MELISSA S		2.2 NAME)				
STREET ADDRESS	8920 LIGHTER KNOT DR.		2 3 STREET	ADDRESS				
CITY-ST-ZIP	LAKE WALES FL		2.4 City-1	ST- Z IP				
TITLE		DELETE	3.1 TITLE				Change	Addition
NAME .			3.2 NAME					
STREET ADDRESS			3.3 STREFT	ADDRESS				
CITY-ST-ZIP		Dottete	3.4. CITY - 5	S1 - ZIP			Channe	Addition
TITLE		☐ DELE1E	4.1 TITLE	}			Change	☐ Addition
NAME OTDECT ADDRESS			4. 2 NAME	ADDDLCC				
STREET ADDRESS			4.3 STREET 4.4 CITY - S					
CITY-ST-ZIP TITLE		DELLIE	5.1 TITLE				Change	Addition
NAME			5.2 NAME	-			-	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DEFFIE	6.1 TITLE	1			Change	Addition
NAME	,		6.2 NAME	1				
STREET ADDRESS			6.3 STREET					
CITY-ST-ZIP			64 CDV - S	3-7IP)				

14. Thereby 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 logal 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 charged, or on an attachment with an address.

SIGNATURE: Allera Numar

1/13/98 (a)

(941)696-4407

FILED

Apr 21 1998 8:00am

Secretary of State