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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000038218 (0)

BETA FIBERGLASS, INC.

## **FILED** Jan 15 1998 8:00am Secretary of State



<u> </u>		•					
Principal Place of Business Mailing Address							1 (FDQ) (D() (QD)
1029 COUNTRY CLUB DR. PO BOX 31845 N PALM BEACH FL 33408 PALM REACH GARDENS							
n Palm Bei	NUT FL 33408	PALM BEACH GARDENS	PALM BEACH GARDENS FL 33420		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					05/12/1995		
2. Principal Place of Business		2a. Mailing Address			4. FEt Number		Applied For
21		26		65-0584380		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #. etc.			5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State				Required	
23		[28]		Election Campaign Financing     Trust Fund Contribution		May Be	
Zip Country		Z(p)			1 Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible		
24 25		29 30		,	Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curr		1551		10. Name and Address of New Registe		
LE	E, JAMES P JR		81	Name			
	29 COUNTRY CLUB DR.		82 Street		ddress (P.O. Box Number is Not Acceptable)		
N	PALM BEACH FL 33408				areas ( .c. box radinad) is not Acceptable)		
			83				
			84	City		<b>85</b> Z	p Code
				,	rporation submits this statement for the purpo attion's board of directors. I hereby accept the	FL	•
SIGNATURE	Signature, typed or printed name of registers of a			ent signature requ	pired whon reinstating) [JA		
12.	OFFICERS AI	ND DIRECTORS DILETE	13.	т	ADDITIONS/CHANGES TO OFFICERS		···· · · ·
NAME	LEE, JAMES P JR	U.I. IL	1 1 DILE			L Change	e L_J Addition
STREET ADDRESS	1029 COUNTY CLUB DR.		1.2 NAME 1.3 STREET	2210004			
CITY-ST-ZIP	N PALM BEACH FL 33408		1.4 CITY - SI - ZIP				
TITLE	D	DELETE	21 TITLE			Change	Addition
NAME	LEE, LEISA L		2.2 NAME			<del></del>	_
STREET ADDRESS	1029 COUNTY CLUB DR.		2.3 STREET	ADDRESS			
CITY-ST-ZIP	N PALM BEACH FL 33408		2.4 CITY-	S1 - Z0P			
TITLE		DETETÉ	3.1.1111.E			Change	e 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP TITLE		E brite	3.4 CITY 5	ST 70P			
NAME		L DELETE	4.1 1(i).6			Change	· L Addition
STREET ADDRESS			4. 2 NAME	ADDRESS			
CITY-ST-ZIP			4.3 \$1REE1	•			
TITLE		DELETE	4.4 CITY - S 5.1 TITLE	1-2IP		Change	e
NAME		<del>-</del>	5.2 NAME			C Gild-igo	
STREET ADDRESS	li L		5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CrTY - S				
TITLE		DELETE	6.1 THTLE	<del>-</del>		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY . CT . 71D			6.4.012.4.6				ı

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 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.