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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000046097 (8)

HERRING SHEET METAL, INC.

Principal Place of Business

Mailing Address

1220 B 53RD STREET MANGONIA PARK FL 33407 1220 B 53RD STREET MANGONIA PARK FL 33407-2256

## FILED Apr 29 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified 06/09/1995	3a. Date of 09/20/		Report
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number		A	riplied For
21		26				65-0602607		N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$		Additional	
22		27				Gr Commente of Glades Desired		Fee R	equired
City & State	<del>)</del>	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Ζφ	Country			8. This corporation has liability for i			s 199.032,
24	25		30			Florida Statutes X Yes No			
	9. Name and Address of Current	Registered Agent		81 Na	10. Name and Address of New Registered Agent				
HERRING, HAROLD H					ne				İ
	22 GREEN GROVE CT		82 Street Add		et Addre	ddress (P.O. Box Number is Not Acceptable)			
LOX	AHATCHEE FL 33470								
		1		83					
				<b>84</b> City	/		FI 8	5 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 charge 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 OFFIC	ERS AND DI	RECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 T	IILE				Change	Addition
NAME .	HERRING, HAROLD H			<b>JAME</b>	Į.				l
STREET ADORESS			1.3 5	STREET ADDRE	ss				
CITY-ST-ZIP	LOXAHATCHEE FL 33470		CITY-ST-ZIP						
TITLE	V			ITLE				Change	Addition
NAME			NAME						
STREET ADDRESS	19722 GREEN GROVE COURT		2.3 STREET ADDRESS		ss				
CITY-ST-ZIP	LOXAHATCHEE FL 33470		2 4 CHY-SI-ZIP						Ì
TITLE			311					Change	Addition
NAME			321	NAME					
STREET ADDRESS			335	STREET ADDRE	ss				
CITY-ST-ZIP			3.4.0	CITY-ST-ZIP	- 1				
TITLE		DELETE	4.1 1					Change	☐ Addition
NAME			4.2	NAME	1				
STREET ADDRESS			4.3 9	STREET ADDRE	ss				
CITY-ST-ZIP			4.4 (	CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 \					Change	☐ Addition
NAME			5.2 3	AME	İ				
STREET ADDRESS				STREET ADDRE	ss	•			l
CITY-ST-ZIP				CITY-ST-ZIP	1				
TITLE	<del> </del>	DELETE	611					Change	Addition
NAME				NAME			_		
STREET ADDRESS				STREET ADORE	çç				
			1	DITY-ST-ZIP	~				
CITY-ST-ZIP	ov certify that the information supplied	with this filing does not qualif			n stated	in Section 119.07(3)(i). Florida Statute	L further ce	rtify tha	Libo

I do 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 eath; 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.

100 May 16 College

1--1- 0104000