SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000052780 (0)

THE STEELE COMPANY

FILED Aug 05 1998 8:00am Secretary of State



1 '	ce of Business	Mailing Address				
325 5TH AVENI INDIALANTIC FI	= :	325 5TH AVENUE				
INDIALANTIC F	L 32 8,0	INDIALANTIC FL 32903			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					07/07/1995	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 333 5TH AVENUE		26 P.c. Doy 033108 Suite, Apt. #, etc. 27 City & State		8	59-3337691	Not Applicable
Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22 SUNTE City & State					Fee Required	
⊢ '		28 INDIALADTIC EL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip Country		8. This corporation owes or has paid to		
24 329		ا مصوبا	30		Personal Property Tax due June 30	
<u> </u>	9. Name and Address of Current		1		10. Name and Address of New Regis	
MOSLEY, CURTIS R				Name		
	EAST NEY HAVEN AVENUE		RO	82 Street Address (P.O. Box Number is Not Acceptable)		
1	BOURNE FL 32901		"			
			83			
			84	City		FL 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		13.	Want signature in	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME	STEELE, SCOTT		1.2 NAME			
STREET ADDRESS	325 5TH AVENUE 1.3 ST		1.3 STREE	TADDRESS		
CITY-ST-ZIP	INDIALANTIC FL 32903		1.4 CITY-S	T-ZIP		
TITLE	VD	DELETE	2 1 TITLE			Change Addition
NAME	STEELE, JASON		2.2 NAME			_ , _
STREET ADDRESS	325 5TH AVENUE		2.3 STREE	I ADDRESS		
CITY-ST-ZIP	INDIALANTIC FL 32903		2.4 CITY-S	T-ZIP		
TITLE	SD	DELETE	3.1 TITLE			Change Addition
NAME	STEPRE, CLAUDE		3.2 NAME			
STREET ADDRESS	325 5TH AVENUE		3.3 STREE	ADDRESS		
CITY-ST-ZIP	INDIALANTIC FL 32903		3.4 CITY-S	T-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		
TITLE		DELETE	5.1 TITL€			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			, 5.3 STREET			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		
TITLE	[6.1 TITLE			Change Addition
NAME			6.2 NAME	4000000		
STREET ADDRESS			6.3 STREET			
C(TY-ST-ZIP			6.4 CITY-S	I-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.