## 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

## DOCUMENT # P95000092020

1. Corporation Name

# FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90212 009 \*\*\*150.00

HOLLIS S	STEEL, INC.										
Principal P ace	e of Business	Mailing Address				<b>⊣</b> ''	EDIŞEDI EIM ISIBI DIŞIL DÖNIŞ DI	1841   UNIVERSE     1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881   1881	B110 3161		IID) AAN FAA
613 ARMENIA D	PRIVE	613 ARMENIA DRIVE									
PENSACOLA FL 32505		PENSACOLA FL 32505			DO NOT WRITE IN THIS SPACE						
						3. Date II	ncorporated or Qualifed				
						1	/1995				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Ni				Ap	lied For
21		26				59-33	47726			No	Applicable
Suite, Act.	#, etc.	Suite, Apt. #, etc.	_						\$8.	.75 <i>A</i>	dditional
22		27			5. Certific	ate of Status Desired		F	ee Re	quired	
City & State	e	City & State			6. Electic	n Campaign Financing		\$5	5.00	May Be	
23		28			Trust f	und Contribution		A	dded t	o Fees	
Zip	Couritry	Zip	Cour	ntry		I	rporation owes the cur	rent year Int	angible X Ye		٦
24 25		29				Personal Property Tax.  10. Name and Address of New Registered A			S	□No	
	9. Name and Address of Curre	nt Registered Agent		04	Name	10. Name	and Address of New	Registered	Agent		<u>-</u>
HUI	LIS, JEFFREY		}	81	Name						
613 ARMENIA DRIVE PENSACOLA FL 32505			ľ	82	Street Arld	ress (P.O. Bo)	Number is Not Accept	table)	·		
				-							
/ LIN	DAOULA I E UZUUU			83							
				84	City				85	Zip (	ode
	to the provisions of Sections 607.05						- (1 5	FL	obonei	ina ita	agistored
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e cif Florida. Such change was	authorized	by th	ne corporati	ion's board of	lirectors. I hereby acce	pt the appoi	ntment	as re	gistered
JIGNATOF E	Signature, typed or printed name of registered ag			Agent s	signature require	ed when reinstating)		DATE	D DID		
12.		NI) DIRECTORS	13.			ADDITI	NS/CHANGES TO OF	-FICERS AN	마마		Addition
TITLE	VP			1.1 TITLE						lange	Addition
NAME	HOLLIS, SHARON B.		1.2 NA		ļ						·
STREET ADDRESS					DORESS						
CITY-ST-ZIP	PENSACOLA FL	DELETE		TY-\$T-2	ZIP	<del></del>	<del></del>		C⊦	ange	Addition
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NAME		<b>.</b>		2.2 NAME 2.3 STREET ADDRESS							
STREET ADORESS			ľ								
- CitY-ST-ZIP		DELETE	_	TY-\$1.	-ZIP	·			ПС	nange	Addition
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NAME			1	_	PAGECO						
STREET ADORE 3S					DORESS						
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		□ vcc.:	4 2 NA						_	Ū	_
NAME					ODRESS						
STREET ADDRESS				TY-ST-							
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NAME			5.2 NA		ļ				_	•	
STREET ADDRESS			5.3 ST	REETA	DDRESS						
CITY-ST-ZIP				TY-ST-							
TITLE	<del> </del>	☐ DELETE	6.1 TIT							nange	Addition
NAME		<u>-</u> ·	6.2 NA	ME						-	
STREET ADDRESS			63 ST	REETA	DDRESS						
OTALET ADDRESS			64.01	TV.ST.	710						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07 (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 imman 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 a 1 other like empowered.

SIGNATURE:

850-435-6819