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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012973

JIM - ED CUSTOM SHEET METAL, INC.

Principal Plac	e or Business	IVIAIIII	ng Address						
4325 S.W. 75TI MIAMI FL 3315			4325 S.W. 75TH AVE. MIAMI FL 33155				DO NOT WRITE IN T	HIS SPACE	
							3. Date Incorporated or Qualifed 02/12/1996		
2. Principal P	lace of Business	2a. M	lailing Address				4. FEI Number		Applied For
21		26	•				65-0649526		Not Applicable
Suite, Apt.	#, etc.		uite, Apt. #, etc.					\$8.75	Additional
22	•	27	•				5. Certifcate of Status Desired	Fee	Required
City & Stat	B		ity & State	د سر- س			6. Election Campaign Financing	\$5.0	0 May Be
23		28	•				Trust Fund Contribution	•	d to Fees
Zip	Country	Zi	ip	Cou	intry		8. This corporation owes the current year	r Intangible	
24	25	29	•	30			Personal Property Tax.	ŬYes	□No
C41	9. Name and Address of Cur		red Agent	144	Γ.		10. Name and Address of New Register	red Agent	
	· · · · · · · · · · · · · · · · · · ·				81	Name			
	ks, edward j jr				82				
432	5 S.W. 75TH AVE.					Street Add	et Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33155					83				
					"				
					84	City	-	85 Zi	p Code
office or r	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida.	Such change was a	authorized	yd b	the corporati	poration submits this statement for the purposion's board of directors. I hereby accept the ap	opointment as	registered
	Signature, typed or printed name of registered	agent and title if ap	plicable. (NOT	- 0	Agen	t signature require	ed when reinstating) DATE		
12.		AND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	D		☐ DELETE	1.1 TI	TLE			☐ Chang	e 🗋 Addition
NAME	MINKS, EDWARD J JR			1.2 N	AME				ļ
STREET ADDRESS	% 4325 S.W. 75TH AVE.			1.3 ST	TREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155			1.4 CI	TY-S1	T-ZIP			
TITLE			☐ OELETE	2.1 Ti	TLE			☐ Chang	e 🗌 Addition
NAME				2.2 N	AME		•		ļ
STREET ADDRESS				2.3 S	TREET	ADORESS			
CITY-ST-ZIP	_			2.4 C	ITY-S	T-ZIP	-		
TITLE			☐ DELETE	3.1 TI	TLE			☐ Chang	e
NAME				3.2 N	AME				
STREET ADDRESS				3.3 S	TREET	ADDRESS			
CITY-ST-ZIP				l	ITY-S				
TITLE			☐ DELETE	4.1 TI				☐ Chang	e
NAME				4. 2 N					
STREET ADDRESS				435	TREET	ADDRESS	•		
CITY-ST-ZIP					ITY-SI	٠ .			
TITLE			☐ DELETE	5.1 TI				☐ Chang	je 🔲 Addition
NAME -				5.2 N					.
					•	ADDRESS			ļ
STREET ADDRESS	····				TY-51		* . *		j
CITY-ST-ZIP		*** *	DELETE	6.1 11			-	. Chang	e Addition
TITLE			☐ DETE (€	6.2 N					
NAME	1			0.2 N/	-MIC	- 1			

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

4-23-99

305-2668642