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 # P96000016608

1. Corporation Name

SOSA'S ORNAMENTAL METAL CO., INC.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90173 036 ***150.00



Principal Place of Business		Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1404 N.W. 23RD STREET		1404 N.W. 23RD STREET					
MIAMI FL 33142		Miami Fl 33142		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
					02/22/1996		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	·	26			65-0644277	├	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Additional	
22		27		5. Certificate of Status Desired		Required	
City & State		City & State		6. Election Campaign Financing	\$5.0	O May Be	
		28		Trust Fund Contribution	Add <u>e</u>	d to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year	Intangible	}
24	25	29 3	0		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent	
			8	1 Name			}
	A, ENRIQUE JR		82 Street Ad		Address (P.O. Box Number is Not Acceptable)		
	SW 2ND TERRACE					_	
MAN	Al FL 33134		8	3			ļ
			8	4 City	-	85 Zi	p Code
							ita registered
office or D	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	honzed b	v the como	corporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as	registered
SIGNATURE	Signature, typed or printed name of registered age	AIOTE: D	legistered Ag	ont organiture co	equired when reinstating) DATE		
12.		ND DIRECTORS	13.	one orginatare to	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12
TITLE	PD	☐ DELETE	1,1 TITLE	····		Chang	
NAME	SOSA, ENRIQUE		1,2 NAME				1
STREET ADDRESS	5740 S.W. 4TH ST.		13 STRE	ET ADDRESS			}
CITY+ST-ZIP	MIAMI FL 33144		1.4 CITY-	- \			j
TITLE	STD	DELETE	2.1 TITLE			☐ Chang	e 🔲 Addition
NAME •	SOSA, ENRIQUE JR	•	2.2 NAME	: 1			
STREET ADDRESS	3931 S.W. 2ND TERRACE			ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134		2, 4 CITY	ST-ZIP			
TITLE	100 100 1 2 00 10	DELETE	3.1 TITLE			Chang	e 🗌 Addition
NAME			3.2 NAME	.			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	1			
TITLE		DELETE	4.1 TITLE			Chang	e 🔲 Addition
NAME			4. 2 NAM	E			}
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY	ST-ZIP		<u>-</u>	
TITLE		☐ DELETE	5.1 TTLE			☐ Chang	e Addition
NAME			5.2 NAME	:			
STREET ADDRESS			5.3 STRE	ET ADORESS			Į
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Chang	e
NAME			6.2 NAME				1
STREET ADDRESS			6.3 STRE	ET ADDRESS			
OUTV OT 71D			6.4 CITY	ST-ZIP			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.

SIGNATURE: