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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600020341 (9)

A AFFORDABLE FABRICATION, INC.

FILED May 06 1998 8:00am Secretary of State



5991 CHESTER AVENUE SUITE 109 JACKSONVILLE FL 32217			5991 CHESTER AVENUE SUITE 109 JACKSONVILLE FL 32217			DO NOT WRITE IN THIS SPACE			
Ī		·				3. Date Incorporated or Qualified 03/05/1996			
2,	Principal Place of I	Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21			26			59-3363880	No	ot Applicable	
	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
23	City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
	Zip	Country	Z(p	Country		8. This corporation owes or has paid the current year Intangible			
24		25		0	Personal Property Tax due June 30. Yes No				
		ame and Address of Current	Registered Agent			10. Name and Address of New Registered /	\gent		
		er, James		81	Name				
5991 CHESTER AVENUE				82 Street Adv		Address (P.O. Box Number is Not Acceptable)			
SUITE 109 JACKSONVILLE FL 32217				83	30,000	Alexander (1.10, Box National in National Inches			
	VACROO	TTIGGE 1 & 9661/		84	City		85 Zip	Code	
						FL FL	11		
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 punted name of registered against and title if applicable. (NOTE: Registered Against signature required when reinstating) DATE									
12		OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITL				1.1 TITLE			L Change	Addition	
NAN				1.2 NAME					
STR	T ADDRESS 5815 WILTSHIRE STREET			1.3 STREET ADDRESS					
CITY	Y-ST-ZIP JAC			1.4 CITY-S	T-ZIP				
TITL		STD DELETE		2.1 TITLE		PRESIDENT/SEC/TONGO	☐ Change	☐ Addition	
NAM	· ·			2.2 NAME		KAMMEREN TOWNS	er.		
STR	EET ADDRESS 3427 SCRIMSHAW DRIVE			2.3 STREET ADDRESS		fresident/sec./Treasur Kammener James Same			
ĊITI	r-st-zip JAC	CKSONVILLE FL 32257		2. 4 CITY-5	ST-ZIP	SAME			
TITL	E		☐ DELETE	3.1 TITLE			Change	Addition	
NAM	RE			3.2 NAME				ł	
STR	EET ADDRESS			3.3 STREET	ADDRESS				
CIT	/-ST-ZIP			3.4. CITY-5	ST-ZIP				
TITL	E		☐ DELETE	4.1 TITLE			Change	Addition	
NAK	AE			4. 2 NAME					
STR	EET ADDRESS			4.3 STREET	address				
CITY	r-st-zip			4.4 CITY - S	T-ZIP				
TITL	E		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAM	AE			5.2 NAME					
STR	EET ADDRESS			5.3 STREET	ADDRESS				
cm	r-ST-ZIP			5.4 CITY - S	T-ZIP	<u> </u>			
TITL	£		DELETE	6.1 TITLE			☐ Change	Addition	
NAN	AE			6.2 NAME					
STR	EET ADDRESS			6.3 STREET	ADDRESS				
	r-ST-ZIP			6.4 CITY-S					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.									