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 # **P96000024244**1. Corporation Name

THE SUN COAST METALS COMPANY, INC.

Principal Place of Business Mailing Address								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1451 WATER VIEW DRIVE 1451 WATER VIEW DRIVE			ľΕ							
LARGO FL 34641 LARGO FL 34641							DO NOT WRITE IN THI	e en	ACE	
						<u>_</u>		3 3 7		
						3	Date Incorporated or Qualifed			}
		10-14-0				+,,	03/19/1996 FEI Number		T T	pplied For
2. Principal Pl	2a. Mailing Address	alling Address			4	59-3381958			ot Applicable	
21		26				+	59-536 1956 Not Applicat			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5.	5. Certificate of Status Desired Fee Required			
22		City & State			····	+	Flatin Consider			May Be
City & State	e ~~	— •	_			B	i. Election Campaign Financing Trust Fund Contribution			to Fees
23	Country	28 Zip	Col	ntry			. This corporation owes the current year li	tanai		10 1 000
Zip	<u> </u>	⊢ '	30			°	Personal Property Tax.		Yes	□No
24	9. Name and Address of Current	29 Registered Agent	1301			10	. Name and Address of New Registered			
	s. Haine and Address of Current	responded Agent		81	Name					
WAGENEN, H W										{
1451 WATER VIEW DRIVE WEST				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
LARC	GO FL 34641			83						
				"				,		
				84	City	-	F	8	5 Zip	Code
		1007 4500 51 11 01-	4.4 44				on submits this statement for the purpose of	<u> </u>	naina its	s registered
office or s	egistered agent, or both, in the State of m familiar with, and accept the obligation	i Florida. Such change was	s authonzed	ו עם נ	tne corporatio	on's b	poard of directors. I hereby accept the app	ointme	ent as re	egistered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	OTE: Registered	Agent	signature required					
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFICERS A			
TITLÉ	D □ DELETE			1.1 TITLE				L	Change	☐ Addition
NAME	WAGENEN, H W		1.2 N	1.2 NAME					٠	}
STREET ADDRESS			1.3 STREET ADORE		ADDRESS					
CITY-ST-ZIP	LARGO FL 34641			1.4 CITY-ST-ZIP						
TITLE	P\$ □ DELETE			2.1 TITLE				L	Change	☐ Addition
NAME	VAN WAGENEN, H W			2.2 NAME						
STREET ADDRESS	1451 WATER VUEW DR WEST			2.3 STREET ADDRESS						
CITY-ST-ZIP	LARGO FL		2.40	ITY-S	T-21P					
TITLE		☐ DELETE	3.1 TI	TLE					Change	☐ Addition
NAME			3.2 N	AME						.
STREET ADDRESS			3.3 S	REET	ADDRESS					
CITY-ST-ZIP	1		3.4. 0	ITY-S	T-ZIP					
TITLE		☐ DELETE	4.1 TI	TLE] Change	☐ Addition
NAME			4. 2 N	AME						
STREET ADDRESS			4.3 S	TREET	ADDRESS					
CITY-ST-ZIP	•		4.4 C	TY-ST	r-Z I P					
TITLE		☐ DELETE	5.1 TI) Change	Addition
NAME			5.2 N	AME						
STREET ADDRESS			5.3 S	TREET	ADDRESS		•			
CITY-ST-ZIP			5.4 C	TY-ST	r-ZIP					l
TITLE	-	☐ DELETE	6.1 TI					Ė] Change	☐ Addition
NAME			6.2 N	AME						Ì
OTDEET ADDDESS	{		6.3 S	TREET	ADDRESS					ſ

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90194 048 ***150.00