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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #**1. Corporation Name P96000035164 (8)

JEFF'S SHEET METAL, INC.

## **FILED** Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									) WIRLI WOLLE BETTLE WE		, 6146) (1848 (	) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
6468 SOUTH	468 SOUTH TER POIN											
HOMOSASSA FL 34448				HOMOSASSA FL 34448 US				DO NOT WRITE IN THIS SPACE				
000			,	<b>J</b> 3				3. Date Incorporate				
]								04/18/1996				
2. Principal Pl	lace of Busin	ess	28.	Mailing Address				4. FEI Number			I A	Applied For
21				26				<b>59-3372919</b> Not Applical			lot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Sta			+	Additional
22				27				b. Certificate of Sta	ius Desireu		Fee F	Deriupes
City & State				City & State				6. Election Campaig				May Be
23				Zip Country				Trust Fund Contr		<u> </u>		to Fees
— · · · · · · · · · · · · · · · · · · ·		Country	-	Zip	30		<i>'</i>	8. This corporation	•			ntangible □ No
24 25 25 9. Name and Address of								Personal Property Tax due June 30. X Yes No  10. Name and Address of New Registered Agent				
D0						81	Name					
DONNELLY, EMMETT 2 JUNGLEPLUM COURT E								75 6 B 11		la La Š		
HOMOSASSA FL 34446							Street Addre	ess (P.O. Box Number i	s Not Acceptat	ole)		
'''		16 01110				83	<u> </u>					
							L				1221 3	
						84				FL	.   [ ]	Code
11. Pursuant	to the provis	ions of Sections 607.05	02 and 6	07.1508, Florida Statu	ites, the at	OOV	e-named corp	oration submits this sta on's board of directors.	tement for the r	purpose of	changing	its registered
office or r	egistered ag m familiar wi	ent, or both, in the Stat the Bridge Court in obii	ie of Flori gatio <del>ns e</del>	da. Such change was £ Section 607.0505, F	authorizei Iorida Stat	d by ute:	y the corporate s.	on's board of directors.	I hereby acce	pt the app	ointment a	s registered
SIGNATURE	Ę	シストノー			CETT F	-	الماسي المارو	$D_{-}$	4.8	-,48		
	Signature, typed			if applicable (NC	TE: Registeres	Ape	ent signature require	ed when reinstating)		DATE		
12.	PT	OFFICERS AF	ND DIRE	DELETE	13.	rı 6		ADDITIONS/CHAP	IGES TO OFFIC	CERS AND	DIRECTO Change	
TITLE		IIV CAMETT			1.1 10						□ Cliange	
NAME		lly, emmett Leplum court e			1.2 N/							
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CITY-ST-ZIP TITLE	VS VS			DELETE 2.170			ST-ZIP				Change	Addition
NAME	STOLICKER, SAMUEL J					2.2 NAME						
STREET ADORESS	F BELERI V AGUNT					2.3 STREET ADDRESS						
CITY-ST-ZIP		ASSA FL 34446					ST-ZIP					
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TITLE .				☐ DELETE	4.1 TO	TLE					Change	☐ Addition
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NAME					6.2 N/		T ADDRESS					l
STREET ADORESS							T ADDRESS					l

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 autochment with an address.

ETHET FDONNELLY 48.98 252 628 7478