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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000052225 (5)

JMC FABRICATION AND MACHINE, INC. Principal Place of Business Mailing Address 996-B GUS HIP ROCKLEDGE FL 32955 396-B GUS HIP ROCKLEDGE FL 32955-4805 3. Date Incorporated or Qualified 3a. Date of Last Report 06/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for inlangible tax under s. 199.032, Yes 24 25 29 30 Florida Statutos □ No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 8Í Name YARDLEY, THOMAS H Bullo C-2 25 W NEW HAVEN AVE STE F 82 Street Address (P.O. Box Number is Not Acceptable) MELBOURNE FL 82001 970 MICHILMANE 83 84 Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required whon reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. TITLE DELLTE 1.1 701€ Change Addition NAME ABERNATHY, GREGORY 1.2 NAME 4700 LIME STREET STREET ADDRESS 1.3 STREET ADDRESS **COCOA FL 32926** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition ABERNATHY, JOANNE 2.2 NAME STREET ADDRESS 4700 LIME STREET 2.3 STREET ADDRESS CITY-ST-ZIP **COCOA FL 32926** 2 4 CHY-\$1-7IP TITLE DELETE Addition 31 1016 Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-7IP CITY-ST-ZIP DELETE TITLE 4 1 1111.1 Change Addition NAME 4. P. NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY - S1 - ZIP DELFTE TITLE Change Addition 517001 NAME 5.2 NAMÉ STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP TITLE DELFTE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do 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 3 if changed, over an attractment with an address.

CIGNIATURE

CITY-ST-ZIP

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May 13 1997 8:00am

Secretary of State