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 # P96000061688 (3)

H & H WO	OD FABRICATIONS	COMPANY, INC	•					
Principal Place of Business Mailing Address							EU IKONO BANAN KA	JUF POTO FOOL
1925 WHITFIELD P. SARASOTA FL 342		1925 WHITFIELD PARK LOOP SARASOTA FL 34243-4092						
						DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE	
						07/22/1996		
2. Principal Place of	of Business	2a. Mailing Address				4. FEI Number	I IA	oplied For
a)		26				65-0682270	No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			· · · · ·	5. Certificate of Status Desired See Required Fee Required		
City & State		City & S	tate			6. Election Campaign Financing	\$5.00	May Be
3		28				Trust Fund Contribution		to Fees
Zip	Country 25	Zip 29		Cou	ntry	This corporation owes or has paid the cur Personal Property Tax due June 30.		tangible No
	Name and Address of Cu		ent	1001		10. Name and Address of New Registered		
-	provisions of Sections 607 pred agent, or both, in the S niliar with and accept the o	.0502 and 607.1508, tate of Florida. Such bliggroup of, Section	Florida Statut change was a 607.0505, Flo	es, the at authorized orida State	84 City ove-named of by the corporates.	corporation submits this statement for the purpose of contion's board of directors. I hereby accept the app		Code ts registered registered
SIGNATURE SIGNAT	ure, typied or printed name of registre	d apent and title if applicable	(NOTI	E Registered	Agent signature r	equired when reinstating) DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND		
LITLE D		Ę	DELETE	1.1 707	LE		☐ Change	Addition
	alse, dane robert	_		1.2 NA	ME			
	100 26TH STREET WES	Ī		1.3 \$1	REET ADORESS			
	RADENTON FL				Y-ST-ZIP		-	
TITLE D		L	DELETE	2.1 TiT			☐ Change	Addition
	ANEY, SHAROLANN			2.2 NA				
	8 56TH STREET CIRCLE	EASI			REET ADDRESS			
	RADENTON FL		DELETE	_	TY-ST-ZIP		Chance	Addition
ITLE		L	UELETE	3.1 111			☐ Change	
KAME				3.2 NA				
STREET ADORESS					REET ADDRESS			
CITY-ST-ZIP		-	DELETE		TY-ST-ZIP		Change	Addition
TTLE		L	P(CLC) [C	4.1 TIT	LE			

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 impowered 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 practices.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

FILED

May 06 1998 8:00am

Secretary of State

Change

Change

Addition

Addition