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 # P96000088933

SOUTHI	ERN-HEAT-TREATING	. INC.						
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Principal Plac	ce of Business	Mailing A	ddress			(4 BA(1) # BI 4 I BI(4 BI(1) BB(1)	BORK OBSK OGRBY IBROD IBNIG IÐI	
192 NE 6TH CT 192 NE 6TH CT								
DANIA FL 33004 DANIA FL 33004								
	•	,				3. Date Incorporated or Qualifect	RITE IN THIS SPACE	· · · · · · · · · · · · · · · · · · ·
						10/25/1996	u	. ,
2. Principal F	Place of Business	2a. Mailin	a Address			4. FEI Number	1	opplied For
21		26				65-0701091	⊢ +−	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							_ \$8.75	Additional
22	سمارتها المراه واستنباسه بالتحوال السا	27				5 Certifcate of Status Desired	Fee F	Required
City & Sta	ite	City &	State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zìp	Country	Zip		Country	,	8. This corporation owes the cu		 . │
24	25	[29]		30		Personal Property Tax.	Yes Table 1 A seem	₩No
	9. Name and Address of	or Current Registered A	Agent	81	Name	10. Name and Address of New	Registered Agent	-
HEN	IGELI, STEVE	* *	•	<u></u>				• .
192 NE 6TH CT			82	Street Add	t Address (P.O. Box Number is Not Acceptable)			
DAN	NA FL 33004			83		20 S. S. S. S.		74 : 14 : (C+1) 1
								4 350 15
				84	City		FI 85 Zip	Code
44 Bumiant	to the provisions of Sections	607.0502 and 607.1508	R Florida Statute			aration submits this statement for th	e purpose of changing it	s registered
11 Pursuant			o, i lorida otaldi	es, the above	e-named corp	oration submits this statement for the	a barbase or or or 911.91.1	0.09.0.0.0.
office or i	registered agent, or both, in the same familiar with, and accept the	he State of Florida. Such he obligations of, Section	n change was at n 607,9505, Flor	es, the above uthorized by rida Statutes	e-named corp the corporation	poration submits this statement for the on's board of directors. I hereby acce	ept the appointment as n	egistered
agent. Fa	am familiar with, and accept the	he obligations of, Section	h change was at n 697,9505, Flor	es, the above uthorized by rida Statutes	e-named corp the corporation	on's board of directors. I hereby acce	apt the appointment as n	egistered
agent. Fa	am familiar with, and accept the street of t	he obligations of, Section	1 697,9505, Flor	rida Statutes Registered Ager	rel	on's board of directors. I hereby acce	apt the appointment as n	egistered
agent. Fa	am familiar with, and accept the street of t	he obligations of, Section	n 69 9505, Flor	Registered Ager	rel		DATE 199	0RS IN 12
agent. Fa	am familiar with, and accept the state of th	he obligations of, Section	1 697,9505, Flor	: Registered Ager 13. 1.1 TITLE	rel	od when reinstating) ,	Lay 19, 199	9
agent. Fa	am familiar with, and accept the state of th	he obligations of, Section	n 69 9505, Flor	: Registered Ager 13. 1.1 TITLE 1.2 NAME	nt/lignature require	od when reinstating) ,	DATE 199	0RS IN 12
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14. I hereby certify that the information supplied with this filling 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 or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Feb 04, 1999 8:00am

Secretary of State

02-04-1999 90008 037 ***150.00