

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90160 048 ***150.00

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1. Entity Name
SOUTHERN-HEAT-TREATING, INC.



Principal Place of Business
**253 JACARANDA DR
PLANTATION, FL 33324**

Mailing Address
**P.O. BOX 16595
PLANTATION, FL 33318**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01242006

Chg-P

CR2E034 (11/05)

4. FEI Number
65-0701091

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENGELI, STEVE
253 JACARANDA DRIVE
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Delete
NAME **HENGELI, DENISE C**
STREET ADDRESS **253 JACARANDA DRIVE**
CITY-ST-ZIP **PLANTATION, FL 33324**

TITLE **P** ☒ Change ☐ Addition
NAME **HENGELI Steve**
STREET ADDRESS **253 JACARANDA DRIVE**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **VP** ☐ Delete
NAME **HENGELI, STEVE**
STREET ADDRESS **253 JACARANDA DRIVE**
CITY-ST-ZIP **PLANTATION, FL 33324**

TITLE **VP** ☐ Change ☒ Addition
NAME **Steve G. GLAD FETTER**
STREET ADDRESS **3910 N. E 27 Ave**
CITY-ST-ZIP **Light House Point FL 33664**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S.T.** ☐ Change ☒ Addition
NAME **Beverly Henry**
STREET ADDRESS **3993 Ridge wood on**
CITY-ST-ZIP **Titusville FL 32796**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Steve Hengeli **Steve Hengeli**

4-1-06

954 452-7815

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #