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

PROFIT CORPORATION ANNUAL REPORT

1998



LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000035543 (2)

R & R SHEET METAL FABRICATION, INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



1480 DOLGNER PL #112 SANFORD FL 32771		1480 DOLGNER PL #112 SANFORD FL 32771			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 04/18/1997	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For	
21		26			59-3448167 Not Applicab	릭
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired Section Secti	
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent	コ
	atero, roberto		8	1 Name		
141 SA	80 DOLGNER PL #112 NFORD FL 32771		8	2 Street Add	ress (P.O. Box Number is Not Acceptable)	
			8	3		٦
			8	4 City	FL 85 Zip Code	7
11. Pursuant	to the provisions of Sections 607.0	02 and 607.1508, Florida Statute	es, the abo	ve-named corp		ī
agent. I a	m familiar with, and according to the old	gattons of, Section 607.0505, Flo	rida Statut	es. les	poration submits this statement for the purpose of changing its registeroration's board of directors. I hereby accept the appointment as registered	
SIGNATURE A	16 Male	RODUATE PLATER	o-PRes	IdenT.		.
12,		gest and title Lappicable (NOTE ND DIRECTORS	: Registered A	kgerit signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u>f</u>
TITLE	D	DELETE	1.1 TITLE		Change Addition	, ֆ
NAME	PLATERO, ROBERTO		1.2 NAM	- 1	,	
STREET ADDRESS	1480 DOLGNER PL #112		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	SANFORD FL 32771		1.4 CHTY	- ST - ZIP		Ž
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NAME			2.2 NAM	E		- [
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STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Additio	<u> </u>
NAME		- -	6.2 NAMI	1		
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			

14. Thereby 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 logal 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 attachment with an address.

CIONATURE.

Potent Plotes Paris

4/21/08 1/27)220 08/