

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

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90025 005 ***150.00

DOCUMENT # P97000108030

1. Corporation Name

PROGRESSIVE STEEL & IRON, INC.

Principal Place of Business

209 MYSTIC LAKE DR. N.
ST. PETERSBURG FL 33702

Mailing Address

209 MYSTIC LAKE DR. N.
ST. PETERSBURG FL 33702

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1997

4. FEI Number

59-3484712

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00-May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 1059 Broadway

Suite, Apt. #, etc.

22 City & State

23 Dunedin, FL

24 34698 25 USA

2a. Mailing Address

26 1059 Broadway

Suite, Apt. #, etc.

27 City & State

28 Dunedin FL

29 34698 30 USA

9. Name and Address of Current Registered Agent

KERRIGAN, DENNIS E
209 MYSTIC LAKE DR. N.
ST. PETERSBURG FL 33702

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. 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 when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME KERRIGAN, DENNIS E
STREET ADDRESS 209 MYSTIC LAKE DR. N.
CITY-ST-ZIP ST. PETERSBURG FL 33702

TITLE V ☐ DELETE

NAME MCKELL, CHARLES E
STREET ADDRESS 3012 101ST ST. E.
CITY-ST-ZIP PALMETTO FL 34221

TITLE V ☐ DELETE

NAME BROWNLEY, RONALD P
STREET ADDRESS 1523 ALMEDA DR.
CITY-ST-ZIP HOLIDAY FL 34690

TITLE ST ☐ DELETE

NAME LEE, CYNTHIA K
STREET ADDRESS 600 CLARENDON ST.
CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cynthia K Lee

Date

4/5/99

Daytime Phone #

(727) 733-3909

0424106

CR25034 (11/98)