2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000087646

Jan 06, 2004 Secretary of State

FILED

Entity Name: STRUCTURAL SYSTEMS (SOUTH BAY) INC.

Current Principal Place of Business: New Principal Place of Business: 800 U S 27 N SOUTH BAY, FL 33493 **Current Mailing Address: New Mailing Address:** PO BOX 7105 SOUTH BAY, FL 33493 FEI Number: 65-0942951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOGUL, DAVID MOGUL, DAVID 185 NW SPANISH RIVER BLVD., STE 290 2810 EAST OAKLAND PARK BLVD. BOCA RATON, FL 33431 STE 102 FT. LAUDERDALE, FL 33306 US 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. SIGNATURE: 01/06/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition AMBROSE, JOHN Name: Name: 800 U S 27 N, PO BOX 7105 Address: Address: City-St-Zip: SOUTH BAY, FL 33493 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CIAPPINA, CAROL A Name: 800 U S 27 N,PO BOX 7105 Address: Address: SOUTH BAY, FL 33493 City-St-Zip: City-St-Zip: Title: Title: VD () Delete () Change () Addition GHAZAL, JEAN P Name: Name: 800 U S 27 N. PO BOX 7105 Address: Address: City-St-Zip: SOUTH BAY, FL 33193 City-St-Zip: Title: VD (X) Delete Title: () Change () Addition JACQUES, OVILA Name: Name: 800 U S 27 N, PO BOX 7105 Address: Address: City-St-Zip: SOUTH BAY, FL 33493 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL A. CIAPPINA **CFO** 01/06/2004