SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1. Corporation Name

ELORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT #** P98000098106

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90035 048 ***150.00

MEGA STEEL MANAGEMENT, INC.										
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Principal Place of Business Mailing Address										
4820 CRAPE MYRTLE ROAD 4820 CRAPE MYRTLE ROAD VALRICO FL 33594 VALRICO FL 33594						CAC				
VALRICO PL 3	N33 94		٧	ALNICO FL	. 33354				DO NOT WRITE IN THIS SPACE	
,									3. Date Incorporated or Qualified	
									11/20/1998	
2. Principal Pl	ace of Busin	ness	2a.	Mailing A	Address					olied For
21			26	0	. 4 - 4 -				\$8.75 A	Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.						5. Certificate of Status Desired Fee Rec	
City & State			City & State				_		6. Election Campaign Financing \$5,00	
23			28	,					Trust Fund Contribution Added to	*
Zip	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Country	 -	Zip		Cour	ıtry		8. This corporation owes the current year	
24		25	29			30			Intangible Personal Property. Yes	No
•	9. Name	and Address of Current	Regis	stered Age	ent				10. Name and Address of New Registered Agent	
000	arnte nic	NUADO A					81	Name		
ROBERTS, RICHARD A 101 EAST KENNEDY DRIVE								Street Ad	Idress (P.O. Box Number is Not Acceptable)	
	TE 2125	MINEUT DRIVE					-			
1	1PA FL 336	ะกว				1	83			
1/11	III A I L 000	JUE				ľ	84	City	FL 85 Zip C	ode
44 5	A- 4b			07.4500.5	Incide Statut	no the che		named som	tion authority this statement for the purpose of changing its rec	istered
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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.

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change Addition