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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1998

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name SOUTH EAST FABRICATION, INC.

S06161 (1)

Mailing Address

1910 NW 18TH ST., UNIT 2

Principal Place of Business

1910 NW 18TH ST LINIT 2

**FILED** Feb 23 1998 8:00am Secretary of State



POMPANO BEACH FL 33069		POMPANO BEACH FL 33069		DO NOT WRITE IN THIS C	DACE.		
					DO NOT WRITE IN THIS SI	PACE	
					3. Date Incorporated or Qualified 10/16/1990		
2. Principal P	lace of Business	2a, Mailing Address			A FEI Number	Applied For	
21 1300 S.W. 2nd St. 28 1300 SW 2nd S				nd Si	65-0262548	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional	
27					5. Certificate of Status Desired	Fee Required	
23 Jom A		28 Tomorno B	each.	FL	6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees	
ZiD	Country	Zip	Count	ry	8. This corporation owes or has paid the current		
330	69 25 Kumuhurd	29 33069	30 Bn	rvan	),   · ·	Yes No	
	g. Name and Address of Curren			7,00010	10. Name and Address of New Registered A	gent	
	IOINES, DAVID		6	1 Name		<u> </u>	
1290 E OAKLAND PK BLVD				82 Street Address (P.O. Box Number is Not Acceptable)			
r	T LAUDERDALE FL 33334		8	3			
			ľ	"			
			8	4 City		85 Zip Code	
					<u> </u>		
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the abo	ve-named	corporation submits this statement for the purpose of coordion's board of directors. I hereby accept the appo	changing its registered	
agent. I a	m familiar with, and accept the obliga	ations of Section 607.0505, Flo	orida Statut	es.	oration's board of directors, i hereby accept the appo	intinent as registered	
SIGNATURE							
SIGNATURE	Signature typod or printed name of registered age	nt and title if applicable. (NOTE	: Registered A	gent signature	required when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	ST	DELETE	1.1 THE		PLESIDENT	Change	
NAME (	DIPIETRO, JOSEPH		1.2 NAM	: (	Di Retro Joseph		
STREET ADDRESS	821 N.W. 47TH ST.		1.3 STRE	et address	821 N.W. 4776 ST -		
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY		Pompano Beach, Fr 300	٠. م	
TITLE	D D DD D D D D D D D D D D D D D D D D	DELETE	2.1 TITLE		rempuno menen, 10 300	Change Addition	
	CTEIMMAN DUILID	43			•		
NAME	STEINMAN, PHILIP		22 NAM	- 1			
STREET ADDRESS	18 NORTHWOODS LN			ET ADDRESS			
CITY-ST-ZIP	BOYNTON BCH FL 33436	T priesté		-ST-ZIP		——————————————————————————————————————	
TITLE		☐ DELETÉ	3.1 TETLE		L	Change Addition	
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADORESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		☐ DELETE	5.1 TITLE		<u> </u>	Change Addition	
NAME		•	5.2 NAM		_		
STREET ADDRESS				ET ADDRESS		ļ	
J				J			
CITY-ST-ZIP		DELETE	5.4 CITY			Change Addition	
TITLE			6.1 TITLE		L	T ANDRINGE T MODITION	
NAME			6.2 NAM				
STREET ADDRESS			6.3 STRE	et address			
CITY-ST-ZIP			6.4 CITY				
14. I hereby co	ertify that the information supplied wi	th this filing does not qualify fo	r the exem	ption stated	d in Section 119.07(3)(i), Florida Statutes, I further cert	ify that the information	
officer or o	director of the corporation or the rece	iver or trusted empowered to e	execute this	report as	nature shall have the same legal effect as if made under required by Chapter 607, Florida Statutes; and that my	/ name appears in	
Block 12 c	or Block 13 if changed, or on an attac	thment with an address.		-			
CICNIATI	UDE. WALLY, 1	LAY JHB :	:		2/11/98 (954) 942	6602	