

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

MAY 22 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortimer
Secretary of State
Tallahassee, Florida 32399

DOCUMENT # **S12677**

(8)

TRICITY STEEL SERVICES, INC.

Principal Office Address: 5411 WEST TYSON AVENUE
TAMPA FL 33611
Mailing Address: 5411 WEST TYSON AVENUE
TAMPA FL 33611

Date of Filing: 05/01/1995

2. Principal Office Address		2a. Mailing Address		3. Date for Corporate or Financial Report		3a. Date of Last Report	
21. 5411 W. Tyson Ave.		2a. P.O. Box 75327		4. FIC Number		59-3040481	
22. State: FL		27. State: FL		5. Certificate of Status Document		[] \$8.75 Additional Fee Required	
23. Tampa, FL		28. Tampa, FL		6. Election Campaign Financing		[] \$5.00 May Be Added to Fees	
24. 33611		29. 33675-5237		7. Other Corporation Information		[X] No [] Yes	

9. Name and Address of Current Registered Agent

LOWE, FREDERICK
3825 HENDERSON BLVD.
SUITE 800
TAMPA FL 33629

10. Name and Address of New Registered Agent

81. Name: C. Stephen Allen Esquire
82. Street Address (P.O. Box Number is Not Acceptable): 4830 W. Kennedy Blvd.
83. Suite 340
84. City: Tampa FL 85. Zip Code: 33609

11. I, the undersigned, do hereby certify that the above named corporation is a corporation organized under the laws of the State of Florida, and that the above named corporation is authorized by the corporation's board of directors to enter into this agreement with the undersigned as its registered agent. I am a duly qualified and licensed agent under the laws of the State of Florida.

SIGNATURE: C. STEPHEN ALLEN

May 18, 1995

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
NAME	D. JOHNSON, FRANK	NAME	DP JOHNSON, FRANK E.
STREET ADDRESS	5411 WEST TYSON AVENUE	STREET ADDRESS	5411 West Tyson Avenue
CITY	TAMPA FL	CITY	Tampa, Florida 33611
STATE	FL	STATE	FL
ZIP CODE	33611	ZIP CODE	33611
NAME	JOHNSON, BOBBIE J.	NAME	
STREET ADDRESS	5411 WEST TYSON AVENUE	STREET ADDRESS	
CITY	TAMPA FL	CITY	
STATE	FL	STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY		CITY	
STATE		STATE	
ZIP CODE		ZIP CODE	

14. I, the undersigned, do hereby certify that the information supplied with this filing is complete, true and correct, and that the corporation is authorized by its board of directors to enter into this agreement with the undersigned as its registered agent. I am a duly qualified and licensed agent under the laws of the State of Florida.

SIGNATURE: *Frank E. Johnson*
FRANK E. JOHNSON, President

May 18, 1995 (813) 837-6795

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1995

[illegible]

DOCUMENT # **S14283**

(3)

ALBERTO R. CARDENAS, P.A.

**1920 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI FL 33131**

**1920 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI FL 33131**

ENVIRONMENTAL QUALITY AND THE FUTURE

3. Date of report (month/day/year)	3b. Date of last request
11/19/1990	02/17/1994

4. Filing Number	Applicant For
65-0230040	Next Applicant Is

5. Certificate of Labor (Required)	☐	\$8.75 Additional Fee Required
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6. The total charge for the above Test Types is:	\$5.00 May Be Added to Fees
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U. The respondent's first husband, deceased, had been previously married to a woman named [redacted] who was also deceased.

2.	201 S. Biscayne Blvd.	2a.	201 S. Biscayne Blvd.
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21	22	23	24	25	26	27	28	29	30	31	
Suite 2600						Suite 2600					

22	Suite 2600	27	Suite 2600
23	Miami, FL	28	Miami, FL

23	33131	24	33131
25	Date	26	Date

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FARMER, EMILY
1224 N.E. 183RD ST.
N. MIAMI BEACH FL 33179

81	Notes	
82	Street Address of the Applicant Not Acceptable	
83		
84	City	FL 85 State

11. The following table shows the number of people in each age group who were interviewed in the study. The table also shows the number of people in each age group who were interviewed in the study. The table also shows the number of people in each age group who were interviewed in the study.

1000

1. ☐ Not a member 2. ☐ Member	3. ☐ Not a member 4. ☐ Member
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D
CARDENAS, ALBERTO R.
1920 MIAMI CENTER
MIAMI FL

14. I certify, under penalty of perjury, that the information supplied and that being voluntarily furnished and those, and copies, to the respondent, dated as hereinabove, are true and correct, and that the undersigned understands and agrees that the foregoing report or supply of information is true and correct, and that any respondent shall have the same right of access and shall be subject to the same procedures as are provided for the respondent of the information by the respondent to be used in the report or response by the respondent. I declare under penalty of perjury that the foregoing is true and correct, and that my right to make a block to block 14, that I am not a party to the report or response.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF FORMING OFFICER OR DIRECTOR

4/14/95 305-539-2480