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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2500 NORTH MILITARY

BOCA RATON FL 33431

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

RACK GARY J. 2500 N MILITARY TRAIL

BOCA RATON FL 33431

SUITE 400

SUITE 400

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22

23

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Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S50428

(9)

Mailing Address

#400

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2500 NORTH MILITARY

BOCA RATON FL 33431

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

STEELMASTER BUILDINGS CORP.

Country

9. Name and Address of Current Registered Agent

25

	Mar 13 1 Secreta	998 ıry c	s { of	3:00am State
	DO NOT WRIT		,, ,, ,,	1911 B1911 B1911 1001
3	Date Incorporated or Qualified	2 117 11110 0		
-	05/07/1991			
4.	FEI Number			Applied For
	65-0263934		<u> </u>	Not Applicable
5.	Certificate of Status Desired			.75 Additional See Required
6.	Election Campaign Financing Trust Fund Contribution			5.00 May Be dded to Fees
	This corporation owes or has p Personal Property Tax due Juni	e <u>30.</u> 🔲] Yes	No_
10.	Name and Address of New R	egistered A	geni	<u> </u>
s (P.O. Box Number is Not Acceptable)				
			Ta=	7in Code
		FL	85	Zip Code
ation	n submits this statement for the oard of directors. I hereby acce	purpose of pt the appo	chan	ging its registered ent as registered

FILED

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's lagent. 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 regulaed when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE **PVST** 1.1 TITLE RACK, GARY J 1.2 NAME 2500 NORTH MILITARY TRAIL #400 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZiP 1.4 CITY - ST- ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-2IP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4,1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST-ZIP City-St-ZIP

Country

61 Name

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83

City

Street Address (

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14. I hereby certify that the information supplied with his filling does not hurlify 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 structure 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 trouble emphywered 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 execute this report as required by Chapter 607.

SIGNATURE:

3/9/98

561/994-3199