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

DDAEIT



COR ANNU	POFIT PORATION AL REPORT Secretary of Sta DIVISION OF CORPOR			ham ate			Apr 14 1997 8:00am Secretary of State				
1. Corporation	MENT # S58 HITE SHEET METAL	3919 , inc.	(9)								
Privicipal Price of Business 2010 W SANDY BLVD STE 18 TANPA FL 33611 US			Mailing Address 3010 W GANDY BLVD STE 15 TAMPA Fo. 33611-2811 US					3. Date Incorporated or Qualified 3a. Date of Last Report			
2. Principal Pl 21 3904	lace of Business 5151 STREET	South	2a. Mailing Address 26 3904	5151	571	int so	v Tk	06/10/1991 4. FEI Number 59-3067105	1 04	· · ·	plied For t Applicable
Suite, Apt	#, etc.	`	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A	
City & State	nDA . FL.		City & State 28 TAMOR	FL	. •			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	May Be
Zip 24 3361	9 25 1.	_	Zip 33619	30 Co	intry	،٤،			Yes	e tax under s. No	
	9. Name and Address	of Current R	egistered Agent		81	Name		10. Name and Address of New Re	gistered	Agent	
WHITE, WALLACE M. 2808 W SHELTON AVE 82							deco	o (D.O. Day Mumber in Mot Accounts)			
TAMPA FL 33611						Sireet Ao	cres	s (P.O. Box Number is Not Acceptat	же) ————		
					83						
					84	City			Fl		
11. Pursuant t	to the provisions of Section	is 607.0502 ar	nd 607.1508, Florida St Jorida, Such change w	atutes, the a	bove d by	named co	rpora	ation submits this statement for the parties board of directors. I hereby acce	ot the an	of changing its	s registered registered
	m familiar with, and accep	t the obligation	ns of, Section 607.0505	, Florida Sta	tutes	3.		,			
SIGNATURE	Signer on Type dier praited name of	rogistered agent ar	d title if applicable.	(NOTE: Registere	d Ape	ını signatura req	uired v	when reinstaling}	DATE		
12.		ICERS AND D		13.				ADDITIONS/CHANGES TO OFFICE	ERS AN		
THLE NAME	D White, Wallace M.		DELETE	1.1 T 1.2 N						Change	Addition)
STREET ADOPESS	2808 W. SHELTON A	VE.		1		ADDRESS					١
C/TY - S1 - ZiP	TAMPA FL	· •			ITY-S	1					13
TITLE			DELETE	2.1 T				<u>,</u>		Change	Addition
NAME				2.2 N							1
STREET ADDRESS						ADDRESS					Į
CHY+\$1+20F THE			☐ DELETE			ST-ZIP				Change	Addition
NAM:				3.2 N						-	
STREET ADDRESS				1		ADDRESS					1
CITY-ST-7#			DELETE			ST-ZIP				Change	Addition
THEE NAME	u		L.J OCLETC		IAME	}				in orania	TT MODITION
STREET ADDRESS					_	ADDRESS					
G(Tr - S1 - 7)P				4.4 0	ITY-S	1					
THLE			DELETE							Change	☐ Addition
NAME				, 5.2 N							
STREET ADORESS						ADDRESS					
CHY+S1+7#P THLE			DELETE		ITY-S ITLE	1-211				Change	Addition
NAME				621		1					
STREET ADDRESS				6.3 8	TREET	ADDRESS					
CITY-S1-7:P				6.40	17 Y - S	ST-ZIP					

14. Lido 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 charged, or or an attachment with an address.

SIGNATURE: