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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 455686

(6)

FAB-ALL METALS, INC.

FILED

Mar 05 1998 8:00am

Secretary of State

na Addross	r remitr demet misht ditte Atter betim ditte

Principal Plac	ce of Business	Mailing Address		3 (ABNIN BURBN BINAN BUNA BUNAN BUNAN BUNAN BUNAN BUNAN BU	aki didir didir didir əldir iddi
800 CARLTON STREET 800 CARLTON STREET					
	LLE FL 32208	JACKSONVILLE FL 32208			
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 07/01/1974	
2. Principal F	Place of Business	2a. Mailing Address	11 20 1	4. FEI Number	Applied For
21 236	3 Loretto Tond	26 3363 Lores	tto Mood	59-1536437	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		6. Certificate of Status Desired	Fee Required
City & Star	Repulle Flo	City & State	e Flo.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Dountry	Zip	Country	8. This corporation owes or has paid the cu	Added to Fees
[24] 33 (2)	123 25	29 31223 30	3		☐ Yes ☐ No
	9. Name and Address of Current		'	10. Name and Address of New Registered	Agent
BL	LACKBURN, BRYAN E.		81 Name		
19	21 DEWEY PLACE		82 Street Addre	one (P.O. Boy Number in Not Acceptable)	
	ACKSONVILLE FL 32207		52 Street Addre	ess (P.O. Box Number is Not Acceptable)	
			83		
]			84 City		85 Zip Code
44 Durauant	to the provisions of Castiana CO7 OFFICE	and 007 4500 Florida Out to		FL	_ '
office or	registered agent, or both, in the State of	and 607,1508, Florida Statutes, If Florida. Such change was auth	the above-named corporation	oration submits this statement for the purpose of ion's board of directors. I hereby accept the ap-	of changing its registered pointment as registered
agent. La	am familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes.	, , , , , , , , , , , , , , , , , , , ,	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Br	egistered Agent algnature require	ed when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PO	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	HORNBROOK, RICHARD G.		1.2 NAME		
STREET ADDRESS	3363 LORETTO RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HORNBROOK, GLADYS W.		2.2 NAME		
STREET ADDRESS	3663 LORETTO RD		2.3 STREET ADDRESS	,	
CITY-ST-ZIP	JACKSONVILLE FL		2. 4 CITY - ST - ZIP		i
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	2		6.3 STREET ADDRESS		
CITY+ST-ZIP	<u> </u>		6.4 CfTY-ST-ZIP		
44 I horoby o	ertify that the information appointed with	this filing does not smallfu for th		Continue 440 07/09/1 Florido Otal dos 16-45	ALC AL COLUMN

1 nereby 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.

CIONATURE.

1 A by Man

-Lla

Outlata or