

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

FILED
Mar 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **251498** (2)
1. Corporation Name
A.A.A. ALUMINUM STAMPING, INC.



Principal Place of Business 3736 E. HILLSBORO AVENUE P.O. BOX 11911 TAMPA FL 33680-1911	Mailing Address 3736 E. HILLSBORO AVENUE P.O. BOX 11911 TAMPA FL 33680-1911
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3. Date Incorporated or Qualified 10/01/1961	3a. Date of Last Report 05/14/1996
4. FEI Number 59-0944102	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
**SAUNDERS, JANET L.
3731 REDWOOD DRIVE
LAND-O-LAKES FL 34639**

10. Name and Address of New Registered Agent
81 Name: **Paul Sidney Elliott - Attorney**
82 Street Address (P.O. Box Number is Not Acceptable): **TUNSTALL FINANCIAL CENTER**
83 **13153 - N. DALE MARRY HWY #120**
84 City: **TAMPA** 85 Zip Code: **FL 33618**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of 607.0505, Florida Statutes.
SIGNATURE: **Paul Sidney Elliott - attorney** DATE: **2/28/97**

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PD	<input type="checkbox"/>
NAME	SAUNDERS, JANET L.	
STREET ADDRESS	3731 REDWOOD DR	
CITY-ST-ZIP	LAND-O-LAKES FL	
TITLE	DST	<input checked="" type="checkbox"/>
NAME	WILLIAMS, JANE E	
STREET ADDRESS	3731 REDWOOD DR	
CITY-ST-ZIP	LAND-O-LAKES FL	
TITLE	D	<input type="checkbox"/>
NAME	SAUNDERS, ANDREW J.	
STREET ADDRESS	3731 REDWOOD DR.	
CITY-ST-ZIP	LAND O LAKES FL	
TITLE	VD	<input type="checkbox"/>
NAME	ZANELLA, DIANE C.	
STREET ADDRESS	450 RIVERA BAY DR.	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	Pres. - Treas. - Dir.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP	34639		
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	Vice Pres - Sec. - Dir	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP	33702		
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do 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 changed, or on an attachment with an address.
SIGNATURE: **DIANE C. ZANELLA** DATE: **2/24/97 (813) 937-3252**

CFR2E034 (9/96)