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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 657246 CONSOLIDATED INDUSTRIES, INC.

FILED Mar 05 1997 8:00am Secretary of State

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			.,				
Principal Place of Business Mailing Address 5761 NW 97TH AVE 5761 NW 97TH AVE MIAMI FL 33142 MIAMI FL 33142-2721					*****		
					3. Date Incorporated or Qualified 02/26/1980	3a. Date of Last Re 05/28/1996	eport
····	lace of Business	2a. Mailing Address			4. FEI Number	 +	plied For
Suite, Apt.	# etc	Suite, Apt. #, etc.			59-2001062	60 7F	t Applicable
22	n, 010.	27			5. Certificate of Status Desired	Fee Re	
City & State	0	City & State			6. Election Campaign Financing	\$5.00	
23 Zip	Country	Zip	Cour	ntru .	Trust Fund Contribution	☐ Added t	
24	25	29	30	ili y	8. This corporation has liability for in Florida Statutes	ntangible tax under s. Yes 🏻 No	. 199.032,
	9. Name and Address of Curre				10. Name and Address of New Reg	jistered Agent	
	LAND, BRIAN			81 Name			
	1 N.W. 37TH AVE.			82 Street Add	ress (P.O. Box Number is Not Acceptabl	Θ)	
MIAI	MI FL 33142			83	· · · · · · · · · · · · · · · · · · ·		
					······································	·····	
				64 City		FL 85 Zip (Code
11. Pursuant office or ragent. La SIGNATURE.	to the provisions of Sections 607.05 egistered agent, or both, in the Star in familiar with, and accept the obli	gations of, Section 607,0505, Fig	orida Stati	Jites.	ocration submits this statement for the prition's board of directors. I hereby accep		s registered registered
	Signature, typed or profed name of registered a	gent and title if applicable. (NOT) ND DIRECTORS		Agent signature requi		DATE	3C (N. 40
12.	PD	DELETE DELETE	1.1 (1)	LE T	ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	HOLLAND, BRIAN		1.2 NA				
STREET AODRESS	5761 N.W. 37TH AVE.		1.3 ST	EET ADDRESS			
017Y-\$1-ZIP	HIALEAH FL		1.4 CIT	Y-ST-ZIP			
THLE		DELETE	2.1 TIT	LE		☐ Change	Addition
NAME			2.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY - ST - ZIP		☐ DELETE	2. 4 CI	TY-ST-ZIP		☐ Change	Addition
NAME			3.2 NA				
STREET ADDRESS			3.3 \$19	REET ADORESS			
CITY+ST-7IP		,	3.4. Ct	TY-ST-ZIP			
TITLE		☐ DELETE	4.1 TiT	LE		Change	Addition
NAME			4. 2 NA				
STREET ADDRESS				REET ADDRESS			
CITY - S1 - ZIP TITLE		DELETE	4.4 CH 5.1 Tr	Y-ST-ZIP		☐ Change	Addition
NAME			5.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY+S1+ZIP			5.4 CIT	Y-ST-ZIP			
Tille		DELETE	6.1 TIT	LE		☐ Change	Addition
NAME			6.2 NA	ME			
STREET ADDRESS				REET ADDRESS			
CITY-ST-7IP	by partify that the information suppl	ad with this filing does not avail		Y-ST-ZIP	d in Section 119.07(3)(i), Florida Statuter	. I hather seelfu thei	the
informatio Lam an o	on indicated on this annual report of	supplemental annual report is to or the receiver or trustee empow	rue and a vered to e	ccurate and that	t my signature shall have the same lega rt as required by Chapter 607, Florida S	l effect as if made un	ider oath; that name