

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90128 033 ***158.75

DOCUMENT # 691881

1. Corporation Name
HALL METAL CORP.

Principal Place of Business
921 NW 3RD AVENUE
POMPANO BEACH FL 33060

Mailing Address
921 NW 3RD AVENUE
POMPANO BEACH FL 33060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/25/1981

4. FEI Number

59-2106255

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



No

9. Name and Address of Current Registered Agent

DI GIULIAN, BRUNO
888 S ANDREWS AVE SUITE 210
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME ST. MARIE, SALLY H.
STREET ADDRESS 741 N.E. 8TH ST.
CITY-ST-ZIP POMPANO BEACH FL

☐ DELETE

TITLE V
NAME ST. MARIE, SALLY H.
STREET ADDRESS 741 NE 8 STR
CITY-ST-ZIP POMPANO BCH FL

☐ DELETE

TITLE P
NAME HALL, PETER D.
STREET ADDRESS 900 NE 9 STR
CITY-ST-ZIP POMPANO BCH. FL

☐ DELETE

TITLE T
NAME ST. MARIE, SALLY H.
STREET ADDRESS 741 N.E. 8TH ST.
CITY-ST-ZIP POMPANO BEACH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary
1.2 NAME Linda B. Hall
1.3 STREET ADDRESS 900 NE 9th Street
1.4 CITY-ST-ZIP Pompano Beach, Fl 33060

☒ Change

☐ Addition

2.1 TITLE Vice President
2.2 NAME Anne M. Hall
2.3 STREET ADDRESS 3 High Street
2.4 CITY-ST-ZIP Old Town, ME 04468

☒ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE Treasurer
4.2 NAME Linda B. Hall
4.3 STREET ADDRESS 900 NE 9th Street
4.4 CITY-ST-ZIP Pompano Beach, Fl 33060

☒ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0154720