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

SIGNATURE:

May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (5)832858 **CENTURY FASTENERS CORP** Mailing Address Principal Place of Business 50-20 IRELAND ST. 50-20 IRFLAND ST. **ELMHURST NY 11373 ELMHURST NY 11373** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1974 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 11-1781097 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Žip This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. Yes ☐ No 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **UNITED STATES CORPORATION COMPANY** Name 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 105 TALLAHASSEE FL 32301 83 Zip Code 11. Pursuant to the provisions of Soctions 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 little if applicable (NOTE Registered Agent argnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ Addition DELETE 1.1 TITLE Change TITLE **SCHLEGEL.JACK** 1.2 NAME NAME 5801 BRIDLEWAY CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE STIEGLITZ, GEORGE 2.2 NAME NAME 11562 LOSANO DR STREET ADDRESS 2.3 STREET ADDRESS BIYNTON BEACH FL BOYNTON BEACH FL 2.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change 3.1 TITLE Addition TITLE STIEGLITZ, EVAN NAME 3.2 NAME 35 POND PARK ROAD STREET ADDRESS 3.3 STREET ADDRESS **GREAT NECK NY** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change 4.1 TITLE Addition TITLE **BRODSKY, THOMAS** 4. 2 NAME NAME 3182 DENTON DR. 4.3 STREET ADDRESS STREET ADDRESS MERRICK NY CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. Thereby 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.

FILED

4/4/48