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

DOCUMENT # H96490

1. Corporation Name

AMERICAN SCRAP METAL ALLOY, INC

	AN SONAF WILIAL ALLOT,				
Principal Place	e of Business	Mailing Address			EINST ALTIC ESEST ALAIS BIATE IDAL
824 NW 9 AVENUE FT. LAUDERDALE FL 33311		824 NW 9 AVENUE FT. LAUDERDALE FL 33311			
				DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualifed 01/27/1986	
2. Principal P	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2645320	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	re	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Country	This corporation owes the current year in	
_	25	— · ·	30	Personal Property Tax.	Yes No
24	9. Name and Address of Curre		!	10. Name and Address of New Registered	d Agent
			81 Name		
	iin, stuart L. D W. Cypress Creek RD.		82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
	TE C-100		,		
	LAUDERDALE FL 33309		83		
1 1	DIODENDALE I E GOGGO		84 City	F	85 Zip Code
					! }
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named co	progration submits this statement for the purpose of	of changing its registered
office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was auf	thorized by the corpora	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate the statement of the purpose of the statement for the purpose of the purp	of changing its registered ointment as registered
office or r	registered agent or both in the State	e of Florida. Such change was aut ations of, Section 607.0505, Flori	thorized by the corporate Statutes. Registered Agent signature requ	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	Ulliment as registered
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F	thorized by the corporada Statutes. Registered Agent signature requests.	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate the appropriate of the appropriat	AND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. IIILE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A DP	e of Florida. Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F	Registered Agent signature required 13	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	Ulliment as registered
office or ragent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS A DP RUBIN, HYMAN S.	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F	Registered Agent signature required. 1.1 TITLE 1.2 NAME	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS A DP RUBIN, HYMAN S. 2121 N.E. 207TH ST.	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F	trionized by the corporation and statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS A DP RUBIN, HYMAN S.	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F ND DIRECTORS DELETE	thonzed by the corporation and the corporation of t	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS A DP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F	Registered Agent signature required in the corporation of the corporat	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	ND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent of Printed name of	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F ND DIRECTORS DELETE	ronzed by the corporation and statutes. Registered Agent signature required to the statutes of the statutes o	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	ND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL. TRUBIN, HOWARD B. 8034 NW 27TH PLACE	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F ND DIRECTORS DELETE	Registered Agent signature required by the corporation of the corporat	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	ND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent of Printed name of	e of Florida, Such change was autiliations of, Section 607.0505, Florient and title if applicable (NOTE. F ND DIRECTORS DELETE	ronzed by the corporation and statutes. Registered Agent signature required to the statutes of the statutes o	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	ND DIRECTORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL TRUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.F. ND DIRECTORS DELETE	Registered Agent signature required by the corporation of the corporat	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12 Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent of Printed Name of registered agent of Printed Name of registered agent of Printed Name of Rubin, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.F. ND DIRECTORS DELETE	Registered Agent signature required by the corporation of the corporat	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12 Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent of Printed Name of registered agent of Printed Name of registered agent of Printed Name of Rubin, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.FND DIRECTORS DELETE	Registered Agont signature required by the corporation of the statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	NND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or ragent. I a agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agent of PRUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL. TRUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL. SRUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL. V	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.F. ND DIRECTORS DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	AND DIRECTORS IN 12 Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL TRUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL SRUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M.	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.FND DIRECTORS DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	NND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or ragent. I a agent. I a signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M. 4450 NW 65TH TERRACE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.FND DIRECTORS DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	NND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL TRUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL SRUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M.	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE. FND DIRECTORS) DELETE DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the application's board of directors. I hereby accept the application of the purpose of t	MND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M. 4450 NW 65TH TERRACE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE.FND DIRECTORS DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appropriate of the purpose of the purpos	NND DIRECTORS IN 12 Change Addition Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M. 4450 NW 65TH TERRACE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE. FND DIRECTORS) DELETE DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the application's board of directors. I hereby accept the application of the purpose of t	MND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M. 4450 NW 65TH TERRACE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE. FND DIRECTORS) DELETE DELETE	Indicated by the corporada Statutes. Registered Agont signature required to the signature requi	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the application's board of directors. I hereby accept the application of the purpose of t	MND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered agency of FICERS ADP RUBIN, HYMAN S. 2121 N.E. 207TH ST. NO. MIAMI BEACH FL T RUBIN, HOWARD B. 8034 NW 27TH PLACE SUNRISE FL S RUBIN, FAYE 2121 NE 207 ST. N MIAMI BCH. FL V RUBIN, DAVID M. 4450 NW 65TH TERRACE	e of Florida. Such change was autiliations of, Section 607.0505, Florident and title if applicable (NOTE. FND DIRECTORS) DELETE DELETE	Registered Agont signature required a Statutes. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the application's board of directors. I hereby accept the application of the purpose of t	MND DIRECTORS IN 12 Change Addition Change Addition Change Addition 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

:R2E034 (11/98)

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90036 025 ***150.00