

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K21423

(4)

1. Corporation Name

A-1 ALUMINUM DESIGN, INC.

Principal Place of Business

13422 CHAMBORD ST.
BROOKSVILLE FL 34813
US

Mailing Address

13422 CHAMBORD ST.
BROOKSVILLE FL 34813
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1988

4. FEI Number

59-2895191

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

HAHN, LAWRENCE F
13400 CHAMBORD STREET, UNIT #10
BROOKSVILLE FL 34813

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-22-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PCD
STREET ADDRESS HAHN, LAWRENCE F.
CITY-ST-ZIP 8122 DALAVAN DR.
BROOKSVILLE FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS HAHN, BARBARA G.
CITY-ST-ZIP 8122 DALAVAN DR.
BROOKSVILLE FL

TITLE ☐ DELETE
NAME STD
STREET ADDRESS WINNICK, DAWN M.
CITY-ST-ZIP 18218 SANGER CT.
HUDSON FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS CANTRELL, JOYCE C.
CITY-ST-ZIP 15679 BROOKRIDGE BLVD.
BROOKSVILLE FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS HAHN, JEFFREY S
CITY-ST-ZIP 7446 MONTROSE AVE.
BROOKSVILLE FL

TITLE ☐ DELETE
NAME D
STREET ADDRESS CANTRELL, RAY L.
CITY-ST-ZIP 15679 BROOKRIDGE BLVD
BROOKSVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

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

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 thereto.

SIGNATURE:

4-21-98 (251) 592-2284

CR2E034 (10/97)