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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000013570

1. Corporation Name

	METAL WUHKS, INC.	Mailing Address					
Principal Place		Mailing Address					
5817 BEGGS ROAD UNIT 6 5817 BEGGS ROAD UNIT 6							
ORLANDO FL 32810 ORLANDO FL 32810					DO NOT WRITE IN TH	IS SPACE	
		** = * * *			3. Date Incorporated or Qualifed		
					02/15/1993		
2. Principal P	lace of Business	2a. Mailing Address	_		4. FEI Number	A	pplied For
21		26			59-3170280	N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		. 75	5. Certificate of Status Desired	7 -	Additional equired
City & State	P	City & State			6. Election Campaign Financing	\$5.00	May Be
23	·	28		-	Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year I		_
24	25 29 30		30		Personal Property Tax.	Yes	□No
	Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent	
CAN	AVAAL LAMEE D		81	Name			
	AVAN, JAMES B ' BEGGS ROAD		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
UNIT 6			83				
ORL	ANDO FL 32810		84	City		. 85 Zip	Code
			1 1	·	F		
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig.	of Florida. Such change was a ations of, Section 607.0505, Flo	authorized by t	ne corporation	oration submits this statement for the purpose n's board of directors. I hereby accept the app	ointment as re	egistered
40	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	agnature requied	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12. TITLE	DP OFFICERS A	DELETE 1.1 TI			ADDITIONS/OFFANGES TO OFF IDENS	Change	
NAME	CANAVAN, JAMES B	-	1.2 NAME			-	!
	5817 BEGGS ROAD #6		1.3 STREET	ADODESS			
STREET ADDRESS	ORLANDO FL						
C/TY-ST-ZIP	ONLANDO I L	☐ DELETE	1.4 CITY-ST- 2.1 TITLE	ZIF		Change	Addition
TITLE		- Deceit	2.1 TILE 2.2 NAME			"	_
NAME			2.3 STREET	ADDDESS			
STREET ADDRESS		_ *	1	١.			-
CITY-ST-ZIP TITLE		☐ DELETE	2.4 CITY-ST 3.1 TITLE	-ur		Change	☐ Addition
NAME							
			3.2 NAME 3.3 STREET	ADDRESS			
STREET ADDRESS			3.4. CITY-ST				
CITY-ST-ZIP TITLE				-417		Change	☐ Addition
			4.1 III.E			_ ,	
NAME			4.2 NAME	ADDOESS			
STREET ADDRESS							
CITY+ST-ZIP			4.4 CITY-ST- 5.1 TITLE	- 217		Change	Addition
TITLE		ے کردرال	5.1 HILE 5.2 NAME				
NAME			5.3 STREET	ADDRESS			
STREET ADDRESS	,		5.4 CITY-ST-				
CITY-ST-ZIP	5.4 C					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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

(407) 298-1276