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 # 204702

SOUTHERN GEAR & MACHINE, INC.

Principal Place	of Business	Mailing Address				t 12011a (taft Coll Alait taut anns 1121 ainn		
3685 NW 106 ST 3685 NW 106 ST								
MIAMI FL 33147 . MIAMI FL 33147			,			DO NOT WRITE IN THIS	SPACE	
	<i>;</i>					3. Date Incorporated or Qualifed		
						07/01/1957	•	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For
21 26						59-0817825		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional
22 27								Required
City & State	9	City & State				6. Election Campaign Financing	•	May Be
Zip	. Country	Zip	Country	,		Trust Fund Contribution		a to rees
	25 . Country	29 30	_	']	This corporation owes the current year Interpretation	angibie ☐ Yes	□No
24	9. Name and Address of Current	<u> </u>	-			10. Name and Address of New Registered	Agent	
			81	Name	e			
ARCH, ALLAN S.				82 Street Address (P.O. Box Number is Not Acceptable)				
2815 N.E. 27 STREET			02	82 Street Address (P.O. Box Number is Not Acceptable)				
FORT LAUDERDALE FL 33306			83					
			84	City			85 Zip	p Code
						FL	<u>. </u>	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auth	norized by	the con	d corpor poration	ation submits this statement for the purpose of 's board of directors. I hereby accept the appoin	changing i ntment as	ts registered registered
SIGNATURE	· · · · · · · · · · · · · · · · · · ·							
	Signature, typed or printed name of registered agent		gistered Age	nt signature	e required w	hen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	TORS IN 12
TITLE	° OFFICERS ANI	DELETE	1.1 TITLE		Τ_	ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	
j	ARCH.A		1.2 NAME			•	_ ,	-
NAME STREET ADDRESS	2815 N.E. 27 ST		1.3 STREET ADDRESS					}
CITY-ST-ZIP	FORT LAUDERDALE FL		1.4 CITY-ST-ZIP		Ĭ			1
TITLE	D DELETE		21 TITLE		+		Change	e Addition
NAME	ARCH,J.S.		2.2 NAME					
STREET ADORESS	41 OCEAN BAY CLUB DR	,	2.3 STREE	TADDRESS	s	,		ĺ
CITY-ST-ZIP	FORT L'AUDERDALE FL		2. 4 CITY-ST-ZIP					
TITLE	SD DELETE 3		3.1 TITLE				☐ Change	e 🗌 Addition (
NAME	ARCH, SUSAN		3.2 NAME					1
STREET ADDRESS			3.3 STREET ADDRESS		s			
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-ST-ZIP					
TITLE			4.1 TITLE				Chang	e 🗍 Addition
NAME			4.2 NAME					ĺ
STREET ADDRESS			1	T ADDRESS	s		-	
CITY-ST-ZIP		C prieste	4.4 CITY-S	T-ZIP			Change	re Addition
TITLE		☐ DELETÉ	5.1 TITLE 5.2 NAME					e LI Addition
NAME				T ADDRESS			76	
STREET ADDRESS	• .		5.4 CITY-S		Ĭ			ļ
CITY-ST-ZIP		DELETE	6.1 TITLE		+-		☐ Change	e Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 employered 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 appendixes, with all other like empowered.

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90096 017 ***158.75