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

STREET ADDRESS

CITY-ST-ZIP

FILED PROFIT Feb 03 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS** DOCUMENT # (8) AIRCO PLATING COMPANY INC Principal Place of Business Mailing Address 3636 NW 46TH ST 3636 NW 46TH ST MIAMI FL 33142-3944 MIAMI FL 33142-3944 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/17/1955 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-0747638 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEVINE, GEIGER, KUPERSTEIN & FREUD, PA 1110 BRICKELL AVENUE SUITE #700 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33131** 83 Zip Code 85 41. 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition KING.GEORGE NAME 1.2 NAME 19410 ROYAL BIRKDALE DR. STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE LEVINE, I. STANLEY NAME 22 NAME 3333 GARDEN AVE. STREET ADDRESS 23 STREET ADDRESS MIAM! BCH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition LEVINE, SHERWIN E. NAME 3.2 NAME STREET ADDRESS 1760 BAY DR. 3.3 STREET ADDRESS MIAMI BCH. FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME **5.2 NAME** (**)**W/ STREET ADDRESS 5.3 STREET ADDRESS 孕ጓ CITY-ST-ZIP 5.4 CITY - ST - 7IP TITLE ☐ DELETE 711111112421129 Ohange Addition 6.1 TITLE NAME 6.2 NAME -02/03/98--01090--003

6.3 STREET ADDRESS

6.4 CITY-S1-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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or one of attachment with an address.

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