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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # 208267** 

(5)

1. Corporatio	METAL PRODUCTS INC	Mailing Address			
260 N W 25 ST 260 N W 25 ST MIAM! FL 33127 MIAM! FL 33127-4330					
				3. Date Incorporated or Qualified	3a. Date of Last Report
<b>a b c c c c c c c c c c</b>	Na - 4 E) - 1	On Malling Address		12/16/1957	07/16/1996
<del></del> ,	lace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.		59-0912668	00 75
22	'	27		5. Certificate of Status Desired	Fee Required
City & Stat	le .	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Gountry	Zip	Country	Trust Fund Contribution	
24	25	29	30	8. This corporation has liability for in Florida Statutes	Intangible tax under s. 199.032,
	9, Name and Address of Curre		[	10. Name and Address of New Re	
MAF	rtin, Leo		81 Name		
2127 BRICKELL AVENUE PH 3602 MIAMI FL 33129			82 Street Addr	ress (P.O. Box Number is Not Acceptate	ole)
			83		,
			84 City		FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statuti	es the above-named corr	poration submits this statement for the r	
office or a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a	authorized by the corporat	poration submits this statement for the ption's board of directors. I hereby acceptions	ot the appointment as registered
0	an raninar with, and accept the obig	jations of, aection 607.0505, nic	mua statutes.	•	
SIGNATURE	Signature, type dior printed name of registered ag	jerc and tille if applicable. (NOT)	Flagistered Agent signature requir	red when reinstating)	DAYE
12.		ND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFIC	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	MARTIN, LEO		1.2 NAME		
STREET ADDRESS	260 N W 25 ST		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33127 ST	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	<u> </u>	Change Addition
NAME	MARTIN, GLORIA	·	2.2 NAME		Li orango Li rasmon
STREET ADDRESS	260 N W 25 ST		2.3 STREET ADDRESS		
CITY-S1-7IP	MIAMI FL 33127	•	2. 4 CITY+ST-ZIP	•	
TITLE		DELETE	3.1 TITLE		Change Addition
NAMÉ			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3 4. CITY-ST-ZIP		
TITLE		L DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME	÷	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST+7iP TiTLE		DELETE	4.4 City-St-ZIP 5.1 Title		Change Addition
NAME		La Patrici	5.2 NAME	11	L. J. G. G. G. J. G.
STREET AUDRESS			5 3 STREET ADDRESS	• • •	
CITY-ST-74P	<b>\</b>		5.4 City - St - ZiP	.*	
HILF		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIF			6.4 CITY - ST - ZIP		
informati 1 am an C	sby certify that the information suppli- on indicated on this armual report or officer or director of the corporation of in Block 12 or Block 13 if changed, i	supplemental annual report is to the receiver or trustee empower.	rue and accurate and that rered to execute this rego	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega (yas required by Chapter 607, Florida S	<ul> <li>s. I further certify that the at effect as if made under oath; that Statutes; and that my name</li> </ul>