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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

D. G. STEEL RULE DIE MFG. CO.

FILED							
Feb 27 1998	8:00am						
Secretary o	f State						



Principal Place of Business Mailing Address				a industa state indust annes attina titer Arbeit dente atter ander dente affir	1 1891	
7000 N W 33 MIAMI FL 33		7000 N W 37 AVE MIAMI FL 33147			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 06/10/1963	-
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied	L For
21		26				plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additi	
22		27			6. Certificate of Status Desired Fee Require	be
City & Stat	le	City & State			6. Election Campaign Financing \$5.00 May	
Zip	Country	28 Zip	Countr		Trust Fund Contribution Added to Fe	
24	25 Country	29	30	у	8. This corporation owes or has paid the current year Intangit Personal Property Tax due June 30.	
	9. Name and Address of Curre		1301		10. Name and Address of New Registered Agent	
TC	DUGAS, ROGER C.		8.	Name		
	00 N W 37 AVE		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
ML	AMI FL 33147			1	order (1707, box viamics 10 root) resoptation	
			83	3		
			84	City	FL 85 Zip Code	1
11 Purcuant	to the provisions of Sections 607 050	22 and 607 1508 Florida Statu	ites the abov	/e-named cor	rporation submits this statement for the purpose of changing its reg	istored
office or r	registered agent, or both, in the State	e of Florida. Such change was	authorized to	y the corpora	ation's board of directors. I hereby accept the appointment as regis	tered
•	am familiar with, and accept the oblig	gations of, Section 607.0505, F	iorioa Statute) S.		
SIGNATURE	Signature, typod or printed name of registered ag	ont and title if applicable (NO	TE Registered Ag	jent signatura requ	ulted when reinstating) DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	PTD	☐ DELETE	1.1 TITLE		☐ Change ☐	Addition
NAME	TOUGAS, ROGER C		1.2 NAME			
STREET ADDRESS	6305 GAGE PLACE 310-A		- 1	T ADDRESS		
CITY - ST - ZIP	MIAMI LAKES FL VD	DELETE	1.4 CITY- 2.1 TITLE		Change	Addition
NAME	MORALES, TOMAS F.	D DECEME	2.1 IIILE 2.2 NAME			AQUIIION
STREET ADDRESS	1850 N.W. 5TH ST.		- 6	T ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.3 STREE			
TITLE	Vo	DELETE	3.1 TITLE	51.50	Change	Addition
NAME	DIGIROLAMO, JEROME		3.2 NAME	j		
STREET ADDRESS	20033 NW 64 CT RD		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI, FL 00000		3.4. CITY	ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change	Addition
NAME	JONES, H. LYNN		4. 2 NAME			
STREET ADDRESS	RT 4 BOX 246			T ADDRESS		
CITY-ST-ZIP	MILAN TN	DELETE	4.4 CITY-	ST-ZIP	Change	Addition
TITLE NAME		ר"ז מנונונ	5.1 TITLE		change	nuulliili
STREET ADDRESS			5.2 NAME	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	6.1 TITLE	01-71	Change	Addition
NAME			6.2 NAME	1		
STREET ADDRESS				T ADDRESS		

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 roceiver 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.

SIGNATURE:

1-9-9 8 305 691-1468

6.4 CITY-ST-ZIP

CITY-ST-ZIP