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

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

Apr 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 285753 (0) SOUTHERN SPECIALTY MFG CO INC Principal Place of Business Mailing Address 3712 NW 71 STREET 3712 NW 71 STREET MIAMI FL 33147 MIAMI FL 33147 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/05/1964 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1060832 21 26 Not Applicable Suite, Apt. #, etc. Suite, Ant. #. etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Added to Fees 23 26 Trust Fund Contribution Country Ζıρ Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name FISHBEIN, SYLVIA 303 FAIRWAY DRIVE Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 83 84 City Zip Code 85 11. 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 ponted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE Change Addition FISHBEIN, SYLVIA NAME 1.2 NAME 303 FAIRWAY DR STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition VTD DELETE 2.1 TITLE Change TITLE FISHBEIN, LAWRENCE NAME 2.2 NAME 3712 NW 71ST STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE FISHBEIN, BERYL 3.2 NAME NAME 3712 NW 71ST STREET STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST-ZIP TITLE DELETE 4.1 TITLE Change Addition FISHBEIN, BERYL NAME 4. 2 NAME 3712 NW 71ST STREET STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZiP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME

**63 STREET ADDRESS** 

LADREWEV. FISHERIN 765/98

6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing oper 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 is supplied with this filing oper 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 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 true for 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. If or an attack the information supplied with this filing oper 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 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 true for execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed. If on an attack the information supplied with this filing oper not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I fur

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