

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

**FILED**  
**May 20 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # 297750**  
 1. Corporation Name  
**Aluminum Manufacturing Industries Inc.**

Principal Place of Business <b>7237 NE 4th Ave          Miami, Fl. 33138</b>	Mailing Address <b>7237 NE 4th Ave.          Miami, Fl. 33138</b>
---	--

3. Date Incorporated or Qualified <b>10-18-1965</b>	3a. Date of Last Report <b>04-06-95</b>
--	--

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
---	--

4. FEI Number <b>59-1883181</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**Pierce-Arthur J.  
 5481 SW 55th Ave.  
 Davie Fl. 33140**

**10. Name and Address of New Registered Agent**

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
<b>FL</b> B5 Zip Code

14. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pierce A. J.	1.2 NAME	
STREET ADDRESS	5481 SW 55th Ave.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Davie, Fla. 33140	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pierce Gary E.	2.2 NAME	
STREET ADDRESS	5481 SW 55th Ave. Davie, Fl.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Davie, Fl.	2.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pierce Elizabeth	3.2 NAME	
STREET ADDRESS	5481 SW 55th Ave.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Davie, Fl.	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Antonia Hichez	4.2 NAME	
STREET ADDRESS	3004 N 37th Terrace	4.3 STREET ADDRESS	
CITY-ST-ZIP	Hollywood, Fl.	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

**3000092139538**  
**5064097-01044-008**  
**\*\*\*330.00**

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.0502, Florida Statutes, and 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. If I am an officer or director of the corporation, or the receiver or trustee empowered to execute this report as required by law, I declare that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:** *Gary E. Pierce* **GARY E. PIERCE** **4/11/97** **305-7515333**

CR2E034 (9/96)