

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

FILED

May 06 1997 8:00am
Secretary of State

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

DOCUMENT # 350741 (5)

1. Corporation Name
METAL-FAB MACHINE CORPORATION, INC.

Principal Place of Business
2100 FACTORY ST
2104 FACTORY ST.
KALAMAZOO MI 49001
US

Mailing Address
2100 FACTORY ST
2104 FACTORY ST.
KALAMAZOO MI 49001-4161
US



2. Principal Place of Business 21 2100 Factory Street Suite, Apt. #, etc. 22 City & State 23 Kalamazoo MI Zip Country 24 49001-4163 25 U.S.A.	2a. Mailing Address 26 2100 Factory Street Suite, Apt. #, etc. 27 City & State 28 Kalamazoo MI Zip Country 29 49001-4163 30 U.S.A.
-----------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------

3. Date Incorporated or Qualified 08/14/1969	3a. Date of Last Report 05/01/1996
4. FEI Number 59-1272694	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 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

SPEERBER, PERRY R.
PO BOX 2611
1203 N. U.S. HWY 1
ORMOND BEACH FL 32075

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 printed name of registered agent and title if applicable


(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	President
NAME	WARE, J.	1.2 NAME	Huan, T.
STREET ADDRESS	2104 FACTORY ST.	1.3 STREET ADDRESS	2100 Factory Street
CITY - ST - ZIP	KALAMAZOO MI	1.4 CITY - ST - ZIP	Kalamazoo MI 49001
TITLE	V	2.1 TITLE	
NAME	SPEERBER, P.	2.2 NAME	
STREET ADDRESS	2104 FACTORY ST.	2.3 STREET ADDRESS	2100 Factory Street
CITY - ST - ZIP	KALAMAZOO MI	2.4 CITY - ST - ZIP	
TITLE	T	3.1 TITLE	Vice President
NAME	HURLBERT, C.	3.2 NAME	Stankey, D.
STREET ADDRESS	2104 FACTORY ST.	3.3 STREET ADDRESS	2100 Factory Street
CITY - ST - ZIP	KALAMAZOO MI	3.4 CITY - ST - ZIP	Kalamazoo MI 49001
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 receiver 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:

 Daniel J. Stankey 4/25/97 (616) 381-2650

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0489730

CR2E034 (9/96)