FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT May 01 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 (2)**DOCUMENT #** 419488 METALINE, INC. Mailing Address Principal Place of Business 2475 WEST 8TH LANE 2475 WEST 8TH LANE HIALEAH FL 33010 HIALEAH FL 33010 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/20/1973 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business Not Applicable 59-1445669 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing City & State \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 Country Zip Zip 8. This corporation owes or has paid the current year Intangible Country Yes Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 Name KLAZKIN, LEONARD 2475 WEST 8TH LANE Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 City 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, typied or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 11 TITLE TITLE KLAZKIN, BETTY 1.2 NAME NAME 2475 WEST 8TH LANE 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 21 TITLE TITLE KLAZKIN, LEONARD NAME 2.2 NAME 2475 WEST 8TH LANE 2.3 STREET ADDRESS STREET ADORESS HIALEAH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS

64 CITY-ST-ZIP

14. Thereby 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 rocgiver or trusted 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 all at himment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DELETE

SIGNATURE SUMM MILL TRE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

NAME STREET ADDRESS

LEONARD KLAZKIN 4/23/98 305-883-0123

Change

__ Change

Addition

Addition