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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90013 038 \*\*\*158.75

| DOCUMENT #          | 426900 |
|---------------------|--------|
| 1. Corporation Name |        |

ALUMINUM, INC.

| Principal Place   | e of Business   | Mailing Address  |  |  |  |               |                                     |  |                                       |
|---|---|--|--|--|--|---------------|-------------------------------------|--|---------------------------------------|
| 522 NORTH WABASH AVENUE   |   |  | 522 NORTH WABASH AVENUE  |  |  | •             |                                     |  |                                       |
| LAKELAND FL 33815   |   | LAKELAND FL 33815  |  |  | DO NOT WRITE IN THIS SPACE   |               |                                     |  |                                       |
| U\$   |   | US   |  |  | Date Incorporated or Qualife   |               |                                     |  | 7                                     |
|   |   |  |  |  | 05/28/1973   | ,             |                                     |  |                                       |
| 2 Principal Di  | lace of Business  | 2a. Mailing Address  |  |  | 4. FEI Number  |               | I A                                 | pplied For                             | ٦.,                                   |
| <del></del>   | idde or adalitess   | <u> </u>   | — ·  |  | 59-1463259   |               |                                     | ot Applicable                          | X                                     |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.  | Suite. Apt. #, etc.  |  |  | ₽             |                                     | Additional                             | 3                                     |
| <del></del>   |   | <b>⊢</b> ¬ ''  | 27   |  | 5. Certificate of Status Desired   | , <b>K</b> i  |                                     | equired                                |                                       |
| City & State  |   | City & State   | <del></del>  |  | 6. Election Campaign Financin  | g _           | \$5.00                              | May Be                                 | 1                                     |
| 23  |   | 28   |  |  | Trust Fund Contribution  | * . 🗆         |                                     | to Fees                                |                                       |
| Zip   | Country   | Zip  | Countr   | у  | 8. This corporation owes the co  | urrent yéar l | ntangible                           |  |                                       |
| 24  | 25  | 29   | 30   |  | Personal Property Tax.   |               | ¥Yes                                | □No                                    |                                       |
| <u></u> 1   | 9. Name and Address of C  |  |  |  | 10. Name and Address of Nev  | v Registere   | d Agent                             |  | 4                                     |
|   |   |  | 8  | Name   |  |               |                                     |  |                                       |
|   | CHT, PAUL RICHARD   |  | 8:   | Street Add   | Iress (P.O. Box Number is Not Acce   | otable)       |                                     | <del>-</del>                           | 1                                     |
|   | EAST ROAD   |  | 0.   | - Sueer Add  | TO SEE A SEE ASSESSMENT OF THE PROPERTY OF THE SEE ASSESSMENT OF THE SECOND OF | <u> </u>      | <u>,</u>                            | 4 1 2 2 2 2 2 2                        |                                       |
| LAKE  | ELAND FL 33809  |  | 8  | 3  |  | 11. (1.1)     |                                     | 調器家                                    |                                       |
|   |   |  | _  | 1 City   |  | <u>点点铁路</u>   | . 85 Zip                            | Code C                                 |                                       |
|   |   |  | 8  | City   |  | F             | L SS ZIP                            |  |                                       |
| 11 Pursuant   | to the provisions of Sections 60  | 7.0502 and 607.1508, Florida Sta   | tutes, the abo   | ve-named con   | poration submits this statement for the  | he purpose    | of changing it                      | s registered                           |                                       |
| office or r   | registered agent, or both, in the   | State of Florida. Such change was<br>obligations of, Section 607.0505, f | s authorized b   | y the corporati  | ion's board of directors. I hereby acc   | лершие арр    | omunent as f                        | ogiatoreu                              |                                       |
|   |   |  |  |  |  |               |                                     |  |                                       |
| SIGNATURE   | Signature, typed or printed name of register  | red agent and title if applicable. (NO                                   | OTE: Registered Ag   | ent signature require  | ed when reinstating) , , 33 , 1  | · DATE        |                                     |  | ] á                                   |
| SIGNATURE   |   | red agent and title if applicable. (NO<br>RS AND DIRECTORS               | OTE: Registered Ag   | ent signature requir   | ed when reinstating) , , , , , , , , , , , , , , , , , , ,   |               |                                     |  | - 168                                 |
|   |   | ar again and any approximation   |  |  |  |               | AND DIRECT                          |  | `~                                    |
| 12.   | OFFICER   | RS AND DIRECTORS   | 13.  |  | ADDITIONS/CHANGES TO C   |               |                                     |  |                                       |
| <b>12.</b><br>TITLE   | PD FEUCHT, PAUL R.  | RS AND DIRECTORS   | 13.<br>1.1 TITLE<br>1.2 NAME   |  | ADDITIONS/CHANGES TO C   |               |                                     |  | =   =   PE034 (11/98)                 |
| 12.<br>TITLE<br>NAME  | OFFICER PD FEUCHT, PAUL R.  | RS AND DIRECTORS   | 13.<br>1.1 TITLE<br>1.2 NAME   | ET ADDRESS   | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | ☐ Addition                             | R2F034                                |
| 12. TITLE NAME STREET ADDRESS   | OFFICER PD FEUCHT, PAUL R. 7129 EAST ROAD   | RS AND DIRECTORS   | 13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STRE   | ET ADDRESS<br>ST-ZIP   | ADDITIONS/CHANGES TO C   |               |                                     | ☐ Addition                             | R2E034                                |
| 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP   | OFFICER PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL   | RS AND DIRECTORS   | 13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STRE<br>1.4 CITY-  | ET ADDRESS<br>ST-ZIP   | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | ☐ Addition                             | R2E034                                |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S.                            | RS AND DIRECTORS   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME   | ET ADDRESS<br>ST-ZIP   | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | ☐ Addition                             | R2F034                                |
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| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY   | ET ADDRESS<br>ST-ZIP<br>ET ADDRESS<br>-ST-ZIP  | ADDITIONS/CHANGES TO C   |               | Change                              | Addition                               | CR2E034                               |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME   | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME  | ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP   | ADDITIONS/CHANGES TO C   |               | Change                              | Addition                               | CR2E034                               |
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| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY  | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP  | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | Addition  Addition                     | S   S                                 |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME  | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME   | ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP  | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | Addition  Addition                     | S   S                                 |
| 12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS  | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE  | ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS  | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | Addition  Addition                     | S   S                                 |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD             | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME   | ET ADDRESS ST-ZIP                    | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | Addition  Addition  Addition           | c                                     |
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| 12.  TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME                                  | PD FEUCHT, PAUL R. 7129 EAST ROAD LAKELAND FL VSD FEUCHT, PATSY S. 7129 EAST ROAD LAKELAND FL | RS AND DIRECTORS  DELETE  DELETE   | 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 TITLE 5.2 NAME  | ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP                                       | ADDITIONS/CHANGES TO C   |               | ☐ Change                            | Addition  Addition  Addition           | c                                     |
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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 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, with all other like empowered.

**SIGNATURE**