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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 478977

(2)

SOUTHERN ALUMINUM, INC.

Principal Place	of Business	Mailing Address	Mailing Address * AMUARY L. HERNANDEZ 205 NM AOTH AVE			I ABURNI BREFRI NUFRAN TONIA ABURN NUTRA FIDEN BROWN ONDER DIDEN DIDEN DIDEN DIDEN BROWN AND FIDEN			
% AMUARY L. I 205 NW 40TH /		•							
DELRAY BEACH		DELRAY BEACH FL 3344	5-3950			3, Date Incorporated or Qualified 06/26/1975	3a. Date of La 04/01/199		
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	1 04/01/100	Applied For	
1876A	Dr. Andre's Way	26			-	59-1597030		Not Applicable	
Suite, Apt #	#, etc	Suite, Apt. #, etc.					□ \$8.7	5 Additional	
22		27				5. Certificate of Status Desired		e Required	
City & State		City & State				8. Election Campaign Financing	\$ 5.	00 May Be	
	y Beach, FL	28				Trust Fund Contribution		led to Fees	
Zip 33445	Country 25 USA	Ζιρ 29				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	Name and Address of Currer	nt Registered Agent	— ta	******		10. Name and Address of New Re	gistered Agent		
HERI	NANDEZ, AMUARY L			81 Name	9 .	•			
205 NW 40TH AVE DELRAY BEACH FL 33445				82 Stree	eet Address (P.O. Box Number is Not Acceptable)				
				000					
				83					
				84 City			85	Zip Code	
				' '			FL I	•	
11. Pursuant to	o the provisions of Sections 607.050	2 and 607, 1508, Florida Statu	ites, the al	ove-name	d corpor	ation submits this statement for the p of board of directors. I hereby accep	urpose of changir	ng its registered	
agent lan	n familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Stat	utes.	, poration	Ta board of directors, Thereby accep	n me appointmen	l as registered	
SIGNATURE .		nanda Amaury					1/16/	97	
	Say are, typed or pled name of reastered agr			Agent signatu	re required	when reinstating)	DATE		
12.	OFFICERS AN	DELETE	13.	16	T	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT		
NAME	•	Las Deteit	1.2 N/		Uom	nandon America I	U CIR	.ge [] Addition	
STREET ADDRESS	HERNANDEZ, AMUARY L 205 NW 40TH AVE.		and the second	ime Reet address		nandez, Amaury L.			
CITY-ST-7IP	DELRAY BEACH FL 33445	,			'				
TITLE	TS	DELETE	2111	TY-ST-ZIP	-		Char	nge Addition	
NAME	HALBE, FRANK		22 N/				_ 512	go /Addition	
STREET ADDRESS	22145 BELMAR DR APT 2103			reet address		•			
CITY-ST-ZiP	BOCA RATON FL			TY-ST-ZIP				/	
TITLE	poor initiality	☐ DELETE	3.1 Ti		Vice	e President	☐ Char	nge Addition	
NAME			3.2 N/	ME		ven D. Wieners			
STREET ADDRESS			3 3 S T	REET ADDRESS	1	7 N.W. 69th Terrace			
CITY-ST-Z-P			1	TY+ST-ZIP		al Springs, FL 330	65		
TITLE	THE PERSON NAMED IN COLUMN NAM	DELETE	4.1 TE		1	<u> </u>	☐ Chan	nge Addition	
NAME			4.2 N	AME		•			
STREET ADDRESS			4.3 ST	reet address					
CITY-ST-ZIP			4.4 Cf	Y-ST-ZIP					
TITLE		☐ DELETE	5.1 111	LE			Chan	ge Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	reet address					
CITY-ST-ZIP			5.4 CI	Y - ST - ZIP	ļ				
THLE		☐ DELETE	6.1 Ti	LE			☐ Char	ge Addition	
NAME			6.2 NA	MÉ					
STREET ADDRESS			6.3 ST	reet address					
CITY-ST-ZIP	and the state of t			Y-ST-ZIP	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
information I am an off	i indicated on this annual report or s	supplemental annual report is the receiver or trustee empor	true and a wered to e	ccurate an	d that m	Section 119.07(3)(i), Florida Statutes y signature shall have the same lega s required by Chapter 607, Florida S	l effect as if made	under oath: that	

SIGNATURE:

Amaury L. Hernandez, Pres/16/97

(561) 274-4425

FILED

Jan 28 1997 8:00am -

Secretary of State

Davtime Phone #