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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra S. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 494066

(4)

THE SCREW MACHINE SHOP, INC.

FILED Jan 30 1997 8:00am Secretary of State

22 1125 Wheeling Road 27 City & State 23 Wheeling, IL. 60090 28 Zip Country 25 29 30 Election Campaign Financing Ference Country 26 29 30 Florida Statutes State Country 27 20 Country 28 This corporation has liability for intangible tax uncertainty Florida Statutes State Country 8. This corporation has liability for intangible tax uncertainty Florida Statutes Yes No 9. Name and Address of Current Registered Agent JOVANOVICH, NICK 100 NORTHEAST THIRD AVE, STE 400 C/O BERGER & DAVIS, PA FORT LAUDERDALE FL 33301	Applied For Not Applicable 75 Additional ee Required 5.00 May Be dded to Fees der s. 199.032, Zip Code ging its registered int as registered
2. Principal Place of Business 2. Robert J. Wunar C/o PMC 2. Suite, Apt #, etc. 2. 1125 Wheeling Road 2. City & State 2. 1125 Wheeling, IL. 60090 2. City & State 2. Suite, Apt #, etc. 2. 1125 Wheeling, IL. 60090 2. City & State 2. Suite, Apt #, etc. 3. Wheeling, IL. 60090 2. City & State 2. Suite, Apt #, etc. 3. Certificate of Status Desired \$8.* Fee \$8.* F	Applied For Not Applicable 75 Additional ee Required 5.00 May Be dded to Fees der s. 199.032, Zip Code ging its registered int as registered
Robert J. Wunar c/o PMC 26 Suite, Apt. #, etc. Su	Not Applicable 75 Additional ee Required 5.00 May Be dded to Fees der s. 199.032, Zip Code ging its registered int as registered
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PART 25 29 30 Florida Statutes 27 10 Name and Address of New Registered Agent 10 Name and Address of New Reg	Zip Code ging its registered int as registered
JOVANOVICH, NICK 100 NORTHEAST THIRD AVE, STE 400 C/O BERGER & DAVIS, PA FORT LAUDERDALE FL 33301 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 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 change 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 agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature byted or printed name of registered agent and bill of applicable (NOTE: Registered Agent signature required when reinstating) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. Title NAME SIREET ADDRESS CITY-ST-ZIP WINAR, ROBERT J 1713 MARTHA LANE MT PROSPECT IL 1.3 STREET ADDRESS CITY-ST-ZIP Wheeling IL 60090	ging its registered int as registered CTORS IN 12
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STREET ADDRESS 63 STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

. Fig. hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 it is 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 chapter 607 and attachment with an address.

SIGNATURE: 7

TO OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Robert J. Wunar, President

1/20/97

Daylime Phone #