

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Amended AR

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 528208

1. Corporation Name

The Cylinder Shop, INC.

Principal Place of Business

Mailing Address

Bldg 209 Mosick Rd
OPR. LOCKHART AIRPORT
OPR. LOCKHART FL 33054

FILED

96 NOV 26 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		02-14-1977		04-18-96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-03205-74		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23		28		<input type="checkbox"/>		5.00 May Be Added to Fees	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution		<input checked="" type="checkbox"/>	
24		29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
Country		Country				<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Luy, WAYMAN				81 Name LUY, ROSA			
575 Coconut Circle.				82 Street Address (P.O. Box Number is Not Acceptable) 575 Coconut Circle			
FT. LAUDERDALE, FL 33326				83			
				84 City FT, Lauderdale FL 85 Zip Code 33326			
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							

SIGNATURE

Rosa Luy

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

10.31.96

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
<input checked="" type="checkbox"/> DELETE				<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
P. LUY, WAYMAN				P. LUY, ROSA			
575 COCONUT CIRCLE				575 COCONUT CIRCLE			
FT, LAUDERDALE FL 33326				FT, LAUDERDALE FL 33326			
UPT				UPT			
LUY, WAYMAN, A.				LUY, WAYMAN, A.			
575 COCONUT CIRCLE				575 COCONUT CIRCLE			
FT, LAUDERDALE FL 33326				FT, LAUDERDALE FL 33326			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
				800002016998			
				-12/02/96--01022--006			
				*****61.25 *****61.25			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			
<input type="checkbox"/> DELETE				<input type="checkbox"/> Change <input type="checkbox"/> Addition			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Rosa Luy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10.31.96

DATE

205.685.5264

Daytime Phone #

CR2E034 (3/96)