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

**PROFIT** CORPORATION ANNUAL REPORT

1998



597409

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(2)

DOCUMENT #

**FILED** Apr 27 1998 8:00am Secretary of State

DOWELL'S ALUMINIUM, INC.											
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						<u></u> .					
Principal Place of Business Mailing Address											
	2610 FTH CT 2610 6TH CT										
PALM HARBOR FL 34684 PALM HARBOR FL 34684						84				DO NOT WRITE IN THIS SPACE	
										3. Date Incorporated or Qualified	$\neg$
										12/07/1978	
2.	Principal P	ncipal Place of Business			2a. Mailing Address					4. FEI Number Applied For	_
21					26					57-0681230 Not Applicable	— Э
	Suite, Apt.	e, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional	
22					27					Fee Required	
	City & State	& State			City & State					6. Election Campaign Financing \$5.00 May Be	
23	<b>3</b> :-	- I Garage			28					Trust Fund Contribution Added to Fees	_
<u></u>	Zip	Country		ļ	<u> </u>		Country			8. This corporation owes or has paid the current year intangible	
24		25 9. Name and Address of Current			29 30					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	4
<del> </del>				Street Call	Plaian Võeur		81	Nar	200	10. Name and Address of New Registered Agent	-
		WELL, BEN									
2610 SIXTH COURT PALM HARBOR FL 34684								Stre	et Addre	ess (P.O. Box Number is Not Acceptable)	
PALM NARBOR FL 34004										┪	
							63				
							84	City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the all							above	<u>I</u> e-nam	ed corp		Н
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta.</li> </ol>							zed by	y the o	orporati	ion's board of directors. I hereby accept the appointment as registered	
		rii lailille <del>y</del> y	iiri, and accept ine	obligations (	or, section 607,0303, 1	riolida a	MAIOIA	ъ.			
Si	GNATURE	Signature, typed	for printed name of registe	ered agent and tit	ie if applicable (N	OTE Regist	ered Age	ent eigne	ture require	ed when reinstating) DATE	
12	12. OFFICERS AN			RS AND DIRE	ND DIRECTORS 13.				_	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	٦
TiT	LE				1.21		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS			Change Addition	П
NA	ME										
ST	REET ADDRESS								is		- 1
CIT	Y-ST-ZIP		IARBOR FL			1.4	CITY-S	T-ZIP			╝
- 117	L€	STD			☐ DELETE	2.1	TITLE			Change	П
NA	ME	DOWELL, JOANNA P			2.2		2.2 NAME				١
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	Y-ST-ZIP						2. 4 CITY-ST-ZIP		4		╝
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NA	. –					3.2 NAME				ł	
l •	TREET ADDRESS				3.3 STREET ADDRESS		S				
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	TITLE						4.1 TITLE			Change	۱
	AME				4. 2 NAME						
	STREET ADDRESS				4.3 STREET ADDRESS		s		Į		
	Y-ST-ZIP			NP: FEE	4.4 CITY-ST-ZIP				4		
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NAJ							NAME				-
	TREET ADDRESS				5.3 STREET A			S		ļ	
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7171							TITLE			Change Addition	۱ ا
NA							NAME				
STREET ADDRESS							6.3 STREET ADDRESS		s		
CIT	Y-ST-ZIP					6.4	CITY-S	( - ZIP			

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 Changed, or on an attachment with an address.