2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 627013

City-St-Zip:

COCONUT CREEK, FL

Entity Name: METAL FORM INC.

FILED Apr 10, 2003 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3400 GATI POMPANO	EWAY DR D BEACH, FL	33069			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
3400 GATI POMPANO	EWAY DR D BEACH, FL	33069			
FEI Number	: 59-1915864	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
SUITE 301 FT LAUDE	6 ST SUITE 3 ERDALE, FL 3	33305 US		d - 65°	
	named entity e of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
	npaign Financir S AND DIREC	ng Trust Fund Contribution().	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (GOHREND, SI 4950 NW 7TH COCONUT CR	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VS (GOHREND, HA 1231 SE 9 AVI POMPANO BO	≣ ′	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TAS (GOHREND, TF 4950 NW 7TH		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SIEGFRIED GOHREND PD 04/10/2003