

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

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 837219 837219 1. Corporation Name: Tech Aeroform Products, Inc			
Principal Place of Business 3551 N.W. 116th Street MIAMI, FL 33167		Mailing Address SAME	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified: 10/19/1976			
4. FEI Number: 59-1693932		Applied For: ☐ Not Applicable	
5. Certificate of Status Desired: ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution: ☐		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent MELIN, DAVID 3551 N.W. 116th Street MIAMI, FL 33167		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code: FL	
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 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 as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PRESIDENT NAME: CHARLES CUSTIN STREET ADDRESS: 3551 N.W. 116th Street CITY-ST-ZIP: MIAMI, FL ☐ DELETE ☒ ADDITION		1.1 TITLE: CEO 1.2 NAME: JEFFREY KOFFMAN 1.3 STREET ADDRESS: 300 PLAZA DRIVE 1.4 CITY-ST-ZIP: VESTAL, NY ☐ Change ☒ Addition	
TITLE: DIRECTOR AND TREASURER NAME: BURTON KOFFMAN STREET ADDRESS: 300 PLAZA DRIVE CITY-ST-ZIP: VESTAL, NY ☐ DELETE		2.1 TITLE: 2.2 NAME: 2.3 STREET ADDRESS: 2.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: DIRECTOR - VICE PRESIDENT NAME: DAVID MELIN STREET ADDRESS: 3551 NW 116th Street CITY-ST-ZIP: MIAMI, FL ☐ DELETE		3.1 TITLE: 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: DIRECTOR NAME: MILTON KOFFMAN STREET ADDRESS: 300 PLAZA DRIVE CITY-ST-ZIP: VESTAL, NY ☐ DELETE		4.1 TITLE: 4.2 NAME: 4.3 STREET ADDRESS: 4.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: CFO and ASST SECRETARY NAME: LEOPOLDO L. PEREZ STREET ADDRESS: 3551 NW 116th Street CITY-ST-ZIP: MIAMI, FL ☐ DELETE		5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: 2. RICHARD KOFFMAN NAME: SECRETARY STREET ADDRESS: 300 PLAZA DRIVE CITY-ST-ZIP: VESTAL, NY ☐ DELETE ☒ ADDITION		6.1 TITLE: 6.2 NAME: 6.3 STREET ADDRESS: 6.4 CITY-ST-ZIP: ☐ Change ☐ Addition	
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 if changed or on an attachment with an address.			
SIGNATURE: Leopoldo L. Perez CFO & Asst Sec. 3/18/98 (305) 685-5993			

CR2E034 (10/97)