

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 839830 (7)

1. Corporation Name

BI-LINK METAL SPECIALTIES INCORPORATED



Principal Place of Business

1215 W. NEWPORT CENTER DR
DEERFIELD BCH FL 33442
US

Mailing Address

862 INDUSTRIAL DR.
ELMHURST IL 60126-1121

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

LUSNIA, RICHARD
6711 NW 25TH TERRACE
FT. LAUDERDALE FL 33309

3. Date Incorporated or Qualified
01/16/1978

3a. Date of Last Report
02/06/1995

4. FEI Number

36-2476146

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 has liability for intangible tax under s. 190.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	☐ DELETE
NAME	LUSNIA, RICHARD	
STREET ADDRESS	6711 NW 25TH TERRACE	
CITY-STATE-ZIP	FT LAUDERDALE, FL 00000	
TITLE	PTD	☐ DELETE
NAME	MYERS, DAVID	
STREET ADDRESS	878 EUCLID	
CITY-STATE-ZIP	ELMHURST, ILL 00000	
TITLE	D	☐ DELETE
NAME	LUSNIA, CHERYL	
STREET ADDRESS	6711 NW 25TH TERRACE	
CITY-STATE-ZIP	FT LAUDERDALE, FL 00000	
TITLE	DS	☐ DELETE
NAME	MYERS, SUZANNE	
STREET ADDRESS	878 EUCLID	
CITY-STATE-ZIP	ELMHURST, ILL 00000	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	18 Ridge Farm Rd
2.4 CITY-STATE-ZIP	Burr Ridge, IL 60525
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	18 Ridge Farm Rd
4.4 CITY-STATE-ZIP	Burr Ridge, IL 60525
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

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 in 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 holder or trustee or trustee-in-powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 or changed or on an affidavit with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/27/96

708-834-4650

Daytime Phone

CR2E034 (12/95)