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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 839830

(7)

## **FILED** Mar 10 1998 8:00am Secretary of State

	( METAL SPECIALTIES, INC.				
Principal Plac		Mailing Address			
	VPORT CENTER DR. 3CH. FL 33442	862 INDUSTRIAL DR. ELMHURST IL 60126-1121			~
US				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
A Principal D	Place of Business	2a. Mailing Address		01/16/1978 4. FEI Number	1 14-0-75-
2. Frincipal F	race of Business		N ELLYN RO	36-2476146	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Ap1 #, etc.	D ECCIN TO		CO 75
22		27		Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23 7:n		28 BLOOMINGOA		Trust Fund Contribution	
Zip 24	Country 25	Zφ 29 60108 3	Country  Du P466	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	e current year Intangible
24	9. Name and Address of Current	1=-1 1=	001482	10. Name and Address of New Registe	
C,	T CORPORATION SYSTEM		81 Name		
4900 COLITH DINE ICLAND DOAD			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324					
			63		
			84 City		85 Zip Code
office or t	registored agent, or both, in the State	of Florida, Such change was au	thorized by the corpo	orporation submits this statement for the purporation's board of directors. I hereby accept the	e appointment as registered
	im familiar with, and accept the obliga	itions of, Section 607.0505, Flori	da Statutes.		į
SIGNATURE	Signature, typind or printed runns of registernit ager	st area title if applicable (NOTE I	Registered Agent signature re	equired when reinstating)	ĀTE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TIFLE	PTD AVEC C	[_] DELETE	1.1 TITLE		Change Addition
NAME	MYERS, DAVID G		1.2 NAME		
STREET ADDRESS	18 RIDGE FARM ROAD BURR RIDGE IL 60525		1.3 STREET ADDRESS		إ
CITY-ST-ZIP	SD SD	DELETE	1.4 City-St-ZiP		Change Addition
TITLE NAME	MYERS, SUZANNE	ב) שננונ	2.1 IIILE 2.2 NAME		CT Cliange CT Monthall
STREET ADDRESS	18 RIDGE FARM ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	BURR RIDGE IL 60525		2.4 CITY-ST-ZIP		
TITLE	D	DELETE	31 TITLE		Change Addition
NAME	ROGERS, JOHN L		3.2 NAME		
STREET ADDRESS	350 NORTH LASALLE		3.3 STREET ADDRESS	39 S. LASALLE SUIT	רטר פו
CITY-ST-ZIP	CHICAGO IL 60610			CHICAGO, IL 60603	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		ĺ
CITY-ST-ZIP		Physics	4.4 CITY-ST-ZIP		C Charge C Addition
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	54 CITY-ST-ZIP 61 TITLE		Change Addition
NAME		ניין טנונונ	6.1 ISILE 6.2 NAME		T Ollaride T Vacing
STREET ADDRESS	·		6.3 STREET ADDRESS		•
GUNECU MOUNTAIN			= 0.0 OTHECT PRODUCES		

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 supplienental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 chapter, or on an attachment with an address.

64 CITY-ST-ZIP

**SIGNATURE** 

3/3/98

630-834-4650