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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 846428
1. Corporation Name
SIFCO CUSTOM MACHINING COMPANY

(1)

FILED Mar 02 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address			•			
	ETKA AVE NORTH ALLEY MN 55427	2430 WINNETKA / Golden Valley		DO NOT WRITE IN THIS SPACE				
				3. Date Incorporated or Qualified 07/07/1980				
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied Fo)r			
21		26		41-0742016 Not Applic	able			
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additions Fee Required	Į			
City & Sta	ale:	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	7ipi	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No				
	9. Name and Address of Curr	ent Registered Agent	10. Name and Address of New Registered Agent	10. Name and Address of New Registered Agent				
-	T CORPORATION SYSTEM 200 S. PINE ISLAND ROAD							
	LANTATION FL 33324		82	Street Address (P.O. Box Number is Not Acceptable)				
			83	3				
			84	City B5 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. Lam familiar with, and accept the obligations of. Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent	signature required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS	13.		OFFICERS AND DIRECTOR	S IN 12
TITLE	D	LETE 1.1 TITLE		☐ Change	Addition
NAME	DEMETTER, RICHARD A	1.2 NAME			
STREET ADDRESS	970 E 64TH ST	1.3 STREET AD	DDRESS		
CITY-ST-ZIP	CLEVELAND, OHIO 00000	1.4 CITY-ST-	ZIP		
TITLE	V D	LETE 2.1 TITLE		Change	Addition
NAME	GONIOR, MARTIN E.	2.2 NAME		•	
STREET ADDRESS	2430 N WINNETKA AVE	2.3 STREET AD	DDRESS		
CITY-ST-ZIP	MINNEAPOLIS, MN 00000	2. 4 CITY - ST-	ZIP		
TITLE	CD D	LETE 3.1 TITLE		Change	Addition
NAME	SMITH, CHARLES H JR	3.2 NAME			
STREET ADDRESS	970 E 64TH ST	3.3 STREET AD	DOMESS		
CITY - ST - ZIP	CLEVELAND, OHIO 00000	3 4. City-St-	ZIP		
TITLE	\$0 DI	LEVE 4.1 THLE		Change	Addition
NAME	GOTSCHALL, GEORGE D	4. 2 NAME			
STREET ADDRESS	970 E 64TH ST	4.3 STREET AD	DDRESS		
CITY-ST-ZIP	CLEVELAND, OHIO 00000	4.4 CHY-ST-	ZIP		
TITLE	PD 0	LETE 5.1 THILE		Change	Addition -
NAME	GOTSCHALL, JEFFREY P	5.2 NAME			
STREET ADDRESS	25 PINE RIVER DR	5.3 STREET AD	DDRESS		
CITY-ST-ZIP	BENTLYVILLE OH	5.4 CITY-ST-	ZIP		
TITLE	□ Di	LETE 6.1 TITLE		☐ Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6 3 STREET AD	DDAESS		
CITY-ST-ZIP		64 CITY-ST-2	ZIP		

14. Thereby 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 supplicational 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 changed, or on an altrachment with an address.

SIGNATURE:

XXXIII

2/15/98

(216) 881-8600