SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(2)

AMERICAN METAL EXCHANGE, INC.

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 JUL 24 All 9: 06

Principal Place of Business Mailing Address						10001100 1100 11100 11100 11110 1110 11	II DIDIA DAGA BABA BABA DA	AIT DIDIN ANDA
5661 34TH ST ST PETERSBU			5661 34TH ST NO ST PETERSBURG FL 33714			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	3a. Date of Last	Report
	****					05/05/1981 4. FE! Number	02/21/1996	i
— , ·	lace of Business	2a. Mailing A	ddress			4. FEI Number		Applied For
21]		26				59-2120146		ot Applicable
Sulte, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired	/	Additional
22 City 9 City			27					Required
City & State	e		City & State			6. Election Campaign Financing	- Taran	May Be
23 Zip	Country	Zip	Zip Country			Trust Fund Contribution Added to Fees		
24	25 29		30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
**	9, Name and Address of Curr			1		10. Name and Address of New Re		
DOI	MALHIE TILL			81	Name			, 1
	Nahue, Tim 1 34th St No		PD Chroat 6 d		Chrone Andri	ress (P.O. Box Number is Not Acceptal	 —————————————————————————————————	$\mathcal{A}\mathcal{V}$
	PETERSBURG FL 33714		82 Street		Street Addr	ress (P.O. Box Number is Not Acceptal	()	\
911	reignobono re 33/14			83				
				84	City		Toel 7:-	Code
							FL "	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Fi	orida Statutes, the	above	named corp	poration submits this statement for the p tion's board of directors. I hereby acce	ourpose of changing	its registered
	m familiar with, and accept the ob	ligations of, Section 6	07.0505, Florida S	tatutes	3.	,,,,,	prime appending a	o vogisiono u
SIGNATURE	Signature typed or printed name of registered	agent and title if applicable.	(NOTE: Hegisti	ered Age	ent signature requi	red when reinstating)	DATE	
12.	OFFICERS /	AND DIRECTORS	1;	3.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	RS IN 12
TITLE	PSTV		DELETÉ 1.1	TITLE			€ Change	Addition
NAME	DONAHUE, TIM		1.2	NAME		, 0,	M. 1201	
STREET ADDRESS	5661 34TH ST NO		1.3	STREET	ADDRESS		Maski,	
CITY-ST-ZIP	ST PETERSBURG FL			CITY-S	T-ZIP		$\lambda I / \alpha$	
TITLE		L	DELETÉ 2.1	TITLE			Change	Addition
NAME	-		2.2	2 NAME				
STREET ADDRESS			2.3	3 STREET	ADDRESS			
CITY-ST-ZIP				4 CITY - S	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
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NAME			5.5	? NAME		1000022 -07/29 ****17	797nindo-	-026
STREET ADDRESS			3.3	STREET	ADDRESS	実実実実17	79 75 ####	172 75
CITY-ST-ZIP				. CITY-S	31-7IP			
TITLE				THE			Change	Addition
NAME OVOCEV ADDRESO				2 NAME	ABBRECO			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-S	1-211		Change	Addition
NAME				NAME				- HOURING
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP								
TITLE				CITY-S	1. TIL		☐ Change	Addition
NAME		_		NAME			onange	
STREET ADDRESS			4		ADDRESS			
CITY-ST-ZIP			4	CHY-S				

14. I do 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 attachange limit an address.

7-17-97.