## ANNUAL REPORT

## **FILED** DOCUMENT # F54312 Apr 22, 2004 08:00 AM Secretary of State 1. Entity Name HIALEAH ALUMINUM SUPPLY, INC. Principal Place of Business Mailing Address 2260 WEST 76 ST 2260 WEST 76 ST HIALEAH, FL 33016 HIALEAH, FL 33016 CR2E034 (10/03) 04192004 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2139950 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIGUERAS, DANIEL 2360 WEST 76TH STREET DO NOT WRITE HIALEAH, FL 33016 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 19/04 SIGNATURE. Signature, typed or still editame of registered agent and little if applicable. (NOTE, Registered Agent signature required when reinstating \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 90 TITLE NAME: FIGUERAS, DANIEL STREET ADDRESS 2360 WEST 76TH STREET CITY-ST-ZIP HIALEAH, FL 33016 VST TITLE U00000125369 04/22/04-80082-015 150.00 NAME FIGUERAS, DAGMARA STREET ADDRESS 2360 WEST 76TH STREET CITY-ST-ZIP HIALEAH, FL 33016 TITLE NAME FIGUERAS, CARLOS A STREET ADDRESS 2260 WEST 76TH STREET DO NOT WRITE CETY-ST-ZE HIALEAH, FL 33016 TITLE IN THIS SPACE FIGUERAS, JAVIER NAME STREET ADDRESS 2260 WEST 76TH STREET City-ST-Zip HIALEAH, FL 33016 TITLE FIGUERAS, DANNY NAME STREET ADDRESS 2260 WEST 76TH STREET CITY-ST-ZIP HIALEAH, FL 33016 TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZiP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNATURE OR DIRECTOR

0 4/19/04

305-821-010

Daytime Phone #