

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 19 1996 8:00 am
Secretary of State

DOCUMENT # F94000003569 (0)

1. Corporation Name

AIRPORT METALS INCORPORATED

Principal Place of Business

6099 TRIANGLE DRIVE
COMMERCE CA 90040

Mailing Address

6099 TRIANGLE DRIVE
COMMERCE CA 90040

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

25

Country

29

Zip

30

9. Name and Address of Current Registered Agent

ABRAMS, JOANN
637 KENSINGTON PLACE
WILTON MANORS FL 33305

3. Date Incorporated or Qualified

07/07/1994

3a. Date of Last Report

02/20/1995

4. FEI Number

95-3290456

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
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 607.0602 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Officer or Director

Signature of New Registered Agent or Representative (if stated)

DATE

12. OFFICERS AND DIRECTORS

1.1

PD
BLIVAS, LARRY
148 SO. WESTGATE AVENUE
LOS ANGELES CA
CD

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.2

BLIVAS, DARNOLD
1047 NAPOLI DRIVE
PACIFIC PALISADES CA
SD

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.3

BLIVAS, PHYLLIS
1047 NAPOLI DRIVE
PACIFIC PALISADES CA

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.4

BLIVAS, PHYLLIS
1047 NAPOLI DRIVE
PACIFIC PALISADES CA

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.5

BLIVAS, PHYLLIS
1047 NAPOLI DRIVE
PACIFIC PALISADES CA

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.6

BLIVAS, PHYLLIS
1047 NAPOLI DRIVE
PACIFIC PALISADES CA

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1

NAME

☐ Change ☐ Addition

1.2

NAME

1.3

STREET ADDRESS

1.4

CITY-STATE-ZIP

☐ Change ☐ Addition

2.1

NAME

2.2

NAME

2.3

STREET ADDRESS

2.4

CITY-STATE-ZIP

☐ Change ☐ Addition

3.1

NAME

3.2

NAME

3.3

STREET ADDRESS

3.4

CITY-STATE-ZIP

☐ Change ☐ Addition

4.1

NAME

4.2

NAME

4.3

STREET ADDRESS

4.4

CITY-STATE-ZIP

☐ Change ☐ Addition

5.1

NAME

5.2

NAME

5.3

STREET ADDRESS

5.4

CITY-STATE-ZIP

☐ Change ☐ Addition

6.1

NAME

6.2

NAME

6.3

STREET ADDRESS

6.4

CITY-STATE-ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied in 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 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. 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Larry Blivas

LARRY BLIVAS

2/12/96 2137222500

CR2E034 (12/95)