

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 91045 044 \*\*\*150.00

DOCUMENT # F96000004654

1. Entity Name  
FUTURE METALS, INC.



Principal Place of Business  
~~5400 N.W. 35TH AVENUE~~  
~~FT LAUDERDALE, FL 33309~~

Mailing Address  
~~5400 N.W. 35TH AVENUE~~  
~~FT LAUDERDALE, FL 33309~~

14008607



2. Principal Place of Business  
10401 STATE STREET  
Suite, Apt. #, etc.

3. Mailing Address  
PO Box 26450  
Suite, Apt. #, etc.

01072004 Chg-P CR2E034 (10/03)

City & State  
TAMARAC, FL 33321  
Zip  
33321 Country  
USA

City & State  
TAMARAC, FL 33320  
Zip  
33320 Country  
USA

4. FEI Number  
65-0123421 Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE, FL 32301

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VTD ☐ Delete  
NAME GLUTH, R C  
STREET ADDRESS 225 WEST WASHINGTON STREET  
CITY-ST-ZIP CHICAGO, IL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME GOTTSCHALK JR, NORMAN E  
STREET ADDRESS 225 WEST WASHINGTON STREET  
CITY-ST-ZIP CHICAGO, IL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME WEBB, ROBERT W  
STREET ADDRESS 225 WEST WASHINGTON STREET  
CITY-ST-ZIP CHICAGO, IL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P ☐ Delete  
NAME BENITEZ, LUIS E  
STREET ADDRESS 5400 NW 35 AVENUE  
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUIS E BENITEZ 3/19/04 954 724 1400

Date

Daytime Phone #