Mailing Address

CANADA J4B 6H5

1440. RUE GRAHAM-BELL ST.

BOUCHERVILLE (OUEBEC)

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700001960

1. Corporation Name

Principal Place of Business

1075 OYHSTERWOOD STREET

HOLLYWOOD FL 33019

IAI STAINLESS STEEL INC.

					04/15/1997		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied	d For
1	26				APPLIED FOR	Not Ap	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addit	
City & State City & State					6. Election Campaign Financing	\$5.00 May	/ Be
28					Trust Fund Contribution	Added to Fe	es
Zip	Country	Zip	Count	ry	8. This corporation owes the current year Intar		
4	25	29	30		Totochair reporty rax:	Yes □1	No
Name and Address of Current Registered Agent					10. Name and Address of New Registered A	gent	
CECTEAU CARDIEUE				Name	В		
FECTEAU, GABRIELLE				2 Street	t Address (P.O. Box Number is Not Acceptable)		
1075 OYSTERWOOD ST.							
HOLLYWOOD FL 33019			8	13			}
			1	4 City		85 Zip Code	9
					<u>F</u> L_		
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	: Registered Å	ent signature	a required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 12
TITLE	CP	☐ DELETE	1.1 TITU			Change	Addition
NAME	BOURRET, REAL		1.2 NAM	E			
STREET ADDRESS	AS DE MENY DOMONEOUS (OMEDEO)			ET ADDRESS	S		
CITY-ST-ZIP	CANADA J4B 4C8	,	14 CITY	-ST-ZIP			Į
TITLE	CV	☐ DELETE	2.1 TITL			Change [Addition
NAME	BOURRET, ALAIN		2.2 NAM	E			1
STREET ADDRESS	4420 DES GRANDS COTEAUX		2.3 STR	EET ADDRESS	s		
	BELOEIL (QUEBEC) CANADA J3	G -2C9		r-ST-ZIP			
TITLE	DS	DELETE	3.1 TITL			Change [Addition
NAME	BOURRET, GUY		3.2 NAM				
STREET ADDRESS	319 JEAN VINET		1	EET ADDRESS	s		
CITY-ST-ZIP	BOUCHERVILLE (QUEBEC) CANA	ADA .I4B -1V3		r-ST-ZIP	<u> </u>		
TITLE	DO TO THE TOTAL TO	☐ DELETE	4.1 TITL			Change [Addition
NAME			4. 2 NA	Œ			
STREET ADDRESS				EET ADORESS	s		
CITY-ST-ZIP				-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL			Change [Addition
NAME			5.2 NAM	E			
STREET ADDRESS			5.3 STR	EET ADDRESS	s		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL			Change [Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STR	EET ADDRESS	s		
U.MELI MUUNEOO							ł

14. 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 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATUSE POUTINED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90124 045 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

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