## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATI

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

G28784

(8)

ANRO METAL MANUFACTURING, INC.

FILED
May 01 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address					
2001 BLOUNT ROAD 2001 BLOUNT ROAD					
	BEACH FL 33069	POMPANO BEACH FL	33069		DO NOT WRITE IN THIS SPACE
	t				DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
6 Principal D	ace of Business	2a. Mailing Address			03/22/1983 4. FEI Number Applied For
<del></del>	ace or business	26			59-2275863 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country Zip		Cou	ntry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	g. Name and Address of Current			81 Name	10. Name and Address of New Registered Agent
	LEMING, O'BRYAN & FLEMING, P			VI Name	
500 EAST BROWARD BLVD., 17TH FLOOR				82 Street A	ddress (P.O. Box Number is Not Acceptable)
BROWARD FINANCIAL CENTRE				83	
r	ORT LAUDERDALE FL 33394			-	
				<b>84</b> City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statu	tes, the at	pove-named o	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.					
<u> </u>					
SIGNATURE	Signature, typod or printed name of registered agent	and tric if applicable (NO	TE: Registored	Agent signature r	equired when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD Collins, Norman Keith	DELETE	1.1 TI	'LF	PD X Change Addition
NAME		1.2 NA	IME	COLLINS, NORMAN KEITH	
STREET ADDRESS	425 NORTHEAST SPANISH T	RAIL	1.3 ST	REET ADDRESS	680 GOLDEN HARP DR.
CITY-ST-ZIP	BOCA RATON FL	□ 05, 575		TY-ST-ZIP	BOCA RATON, FL 33432
TITLE	CD	☐ DELETE	2.1 11	1	CD
NAME	COLLINS, PAMELA R		2.2 NA		COLLINS, PAMELA R.
STREET ADDRESS	425 NORTHEAST SPANISH T	KAIL		REET ADDRESS	680 GOLDEN HARP DR.
CITY-ST-ZIP	BOCA RATON FL	DELETE	2. 4 C	TY-ST-ZIP	BOCA RATON, FL 33432
TITLE		- Dittelle	3.1 N		
NAME CTOTET ADDOTES				REE1 ADDRESS	
STREET ADDRESS				TY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	4.1 1		☐ Change ☐ Addition
NAME			4. 2 N	AME	
STREET ADDRESS			4.3 S1	REET ADDRESS	•
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP	
TITLE		DELETE	5.1 TI	TLE .	Change Addition
NAME			5.2 N/	ME	-
STREET ADDRESS			5.3 ST	reet address	
CITY-ST-ZIP			54 C	TY-S1-ZIP	
TITLE		☐ DELETE	61 TI	ILE	Change L Addition
NAME			6.2 N/	ME	
STREET ADDRESS			6.3 \$1	REET ADDRESS	
CITY-ST-ZIP	- Ar		6.4 CI	TY-ST-ZIP	d in Continue 110 07/9V/). Elevido Clatutos I further carrifu that the information
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 attact tient with an address.					
block is the block in the catalogue of the an additional and an additional					