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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G37856

(3)

AMPCO POWER CORPORATION

## FILED Jan 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address											
% PAUL WH	FLAN	% PAUL WHELAN									
2410 PRAIRI		P.O. BOX 4321				1					
MIAMI BEAC	H FL 33140	MIAMI LAKES FL 33014				DO NOT WRITE IN THIS SPACE					
						3.	Date Incorporated or Qualifie	d ,——			
							05/09/1983				
	Place of Business	2a. Mailing Address	2a. Mailing Address			4.	FEI Number			Ap	plied For
21		26	26				59-2597065		. [	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				Τ_	Contification of Status Desired		\$8	.75 /	Additional
22		27				5.	Certificate of Status Desired				quired
City & Stat	e	City & State				6.	Election Campaign Financing		\$!	5.00	May Be
23		28				``	Trust Fund Contribution				o Fees
Zip	Country	Zip	Coun	try		8.	This corporation owes or has	paid the cu	rrent y	ear int	angible
24	25 29 30						Personal Property Tax due Ju	ne 30.	☐ Yes	, [	No
9. Name and Address of Current Registered Agent						10.	Name and Address of New	Registered	Agent		
WHELAN, PAUL E				31	Name			· ·			
15495 EAGLER NEST LANE				2	Street Address (P.O. Box Number is Not Acceptable)						
SUITE 100				~	Street Addre	Tee Addition (1.0. box (adminor) to not Acceptable)					
MIAMI LAKES FL 33014				33				1		· ·	
J	1411 D 11/CO   C 000   4		<u> </u>	4							
			Įε	34	City			FL	85	Zip (	Code
11. Pursuant	ve-	named corpo	oratio	on submits this statement for the	purpose o	fchan	ging it	s registered			
office or r	registered agent, or both, in	the State of Florida. Such change was a the obligations of, Section 607.0505, Flo	uthorized	by t	he corporation	on's t	board of directors. I hereby acc	ept the ap	pointme	ent as	registered
*	an amiliar with, and accept	the obligations of coolor correct, the	· IQE, OIEIG								
SIGNATURE	Signature, typed or printed name of re	egistered agent and title if applicable. (NOTE	Registered A	gent	signature require	d when	reinstating)	DATE			
12. OFFICERS AND DIRECTORS				13.			ADDITIONS/CHANGES TO OFF	ICERS ANI	D DIRE	CTOR	S IN 12
TITLE	PVD	☐ DELETE	1.1 TITU	E				ï	☐ CH	nange	Addition
NAME	WELSH, DAVID		1.2 NAM	ĪΕ							
STREET ADDRESS	2410 PRAIRIE AVE.		1,3 STRE	1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI BEACH FL 33140		1.4 CITY	1,4 CITY-ST-ZIP							
TITLE		DELETE	2.1 TITLI					,	Ch	папде	Addition
NAME	<del>-</del> : 1		1	2.2 NAME					_	-	
STREET ADDRESS			2.3 SYREET ADDRESS								
CITY-ST-ZIP			2. 4 CITY - ST-ZIP				•				
TITLE	<del></del>	DELETE	3.1 TITL		LIF				Ci	nange	Addition
1115		>cd.ir		•						Ba	

6.4 City-st-Zip

14. 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 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 attachnest with an address.

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP\_\_\_

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

3.4. CITY - ST-ZIP

4.1 TITLE 4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY - ST - ZIP

CITY-ST-ZIP

CITY - ST - ZIP

STREET ADDRESS

David HAlleh Davidio

DELETE

DELETE

DELETE

105/1998

305 389-0410

Change

Change

Change

Addition

☐ Addition

Addition