• 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 # G75032 (4)

AMERICAN ALUMINUM, INC.

Mailing Address

S ROBERT A. DIČKINSON

Principal Place of Business

% ROBERT A. DICKINSON

FILED Apr 22 1998 8:00am Secretary of State



480 SOUTH INDIANA AVE. ENGLEWOOD FL 84223-3702		480 SOUTH INDIANA AVE. ENGLEWOOD FL 34223-3702		DO NOT WRITE IN THIS SPACE			
4,1022,11000			. _		3. Date Incorporated or Qualified		
					12/19/1983		
	ace of Business	2a. Mailing Address	, .		4. FEI Number		Applied For
21 HME	RICAN ALUMINUTE	(26 HMERICAN /H	UMIN	Jun IN	59-2309551		Not Applicable
\$uite, Apt. #, etc. Suite, Apt. #, etc. ZZ 2780 IVYLN UNIT3 27 2780 IVY			LN I	UNIT 3	5. Certificate of Status Desired	v	Additional Required
City & State City & State				CI.	6. Election Campaign Financing		O May Be
23 ENGŒW000, 7-L 28 ENGŒW000 Zip Country Zip			Countr	<u> </u>	Trust Fund Contribution		d to Fees
24 342	26 USA	_ 		'SA	This corporation owes or has paid the operation of the Personal Property Tax due June 30.		Mangible Mo
	9. Name and Address of Current				10. Name and Address of New Registere	d Agent	7
DICKINSON, ROBERT A. 81 Name							
AND ARISTI BIRIALIA ALP				82 Street Address (P.O. Box Number is Not Acceptable)			
ENGLEWOOD FL 33533				Olidol Addi	COS (F.O. DOX 141111DOI 10 1101 / COSEPILIOID)		
			63				İ
			84	City	······································	B5 Zip	p Code
44 Duray and	to the provinces of Sections 607 0500	and CO7 1500 Florida Statutos	the shor	us named som	Forestian submitte this statement for the surroge		its registered
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 against	and title if applicable INOTE:	Registered Ag	gent signature require	red when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	DP .	☐ DELETE	1.1 TITLE			Change	Addition
NAME	VAN TILBURG, GEORGE		1.2 NAME				
STREET ADDRESS	\$50 LEACH ST		1.3 STREE	ET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD, FL 00000		1.4 CITY-				
TITLE	V	☐ DELETE	2.1 TITLE			Change	Addition C
NAME	NICOL, WILLIAM H		2.2 NAME				
STREET ADDRESS	840 N ELM		2.3 STREE	ET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD, FL 00000		2. 4 CITY-	-ST-ZIP			
TITLE	8	☐ DELETE	3.1 TITLE		-	Change	Addition
NAME .	VAN TILBURG, KATHERINE		3.2 NAME				
STREET ADDRESS	\$50 LEACH ST		3.3 STREE	T ADDRESS			
CITY-ST-ZIP	ENGLEWOOD, FL 00000		3.4. CiTY-	-ST-ZIP			
TITLE	T .	DELETE	4.1 TITLE			Change	Addition
NAME	DAVIS, CHRISTOPHER J		4. 2 NAME	E			
STREET ADDRESS	550 LEACH ST		4.3 STREE	ET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD FL		4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-				
					Section 119.07(3)(i), Florida Statutes, I further re shall have the same legal effect as if made		
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.							