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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H41265

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A & L MACHINE, INC.

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**FILED** 

Mar 13 1997 8:00am

Secretary of State

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Principal Place of Business Mailing Address  PRINCIPAL PLACE OF Business Mailing Address  PRINCIPAL PLACE OF Business Mailing Address  2901 W. NORTH "B" ST. TAMPA FL 33609-2353							
					3. Date Incorporated or Qualified 02/06/1985	lified 3a. Date of Last Report 02/05/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21]		26			59-2523639		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	<b>├</b> ¬ ′		6. Election Campaign Financing		.00 May Be
Zip Country		28]	Zip Country		Trust Fund Contribution Added to Fees		
	25 29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
24	9. Name and Address of Current Registered Agent		130]	10. Name and Address of New Registered			
GAI	RCIA, LYDIA	<u> </u>	В	1 Name			
	1 N. "B" ST.		90 Ctcool Adds		rose (P.O. Boy Number is Not Associable)		
	APA FL 33609		82 Street Addre		dreśs (P.O. Box Number is Not Accepta	iDie)	
			8:	3			
			_		· · · · · · · · · · · · · · · · · · ·		
			B4	4 City		FL  85	Zip Code
agent I a SIGNATURE	to the provisions of sections our .co egistered agent, or both, in the Sta m familiar with, and accept the obl Signature, typed or printed name of registered is	igations of, Section 607.0505,	, Florida Statut	es.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changi ept the appointmen	ng its registered
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	TORS IN 12
TITLE	STD	☐ DELET€	1.1 TITLE			☐ Cha	nge 🔲 Addition
NAME	GARCIA, ARMANDO A.		1.2 NAME	E			
STREET ADDRESS	2901 N. "B"		13 STRE	ET ADDRESS			
CITY-ST-ZIP	TAMPA FL		1.4 City-	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
TITLE	PD AND I VOIA	☐ DELFTE	21 THILE			∐ Cha	nge 🔲 Addition
NAME	GARCIA, LYDIA		2.2 NAME				
STREET ADDRESS	2901 N. *B*			ET ADDRESS			
CITY-ST-ZIP	TAMPA FL	T DELETE	2 4 CITY	·····		Поь	. Thaise
TITLE		☐ DEŁETE	3.1 TITLE			☐ €ha	nge L_  Addition
NAME STORES ADDRESS			3.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Cha	nge Addition
NAME			4. 2 NAM			U10	9:
STREET ADDRESS			•	ET ADDRESS	•		
CITY-ST-ZIP			4.4 CITY		•		
TITLE		☐ DELETE	5.1 TITLE			Cha	nge - Addition
NAME			5.2 NAME	:			
STREET ADDRESS			E	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TillE			☐ Cha	nge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ET ADDRESS	•		
Airy or sun					:		+

I do 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 ennual 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 play by ent with an address.

MATURE CHARLES AND A CARRIER 3- 11-90 law 2000 200