

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

FILED
Apr 10 1998 8:00 am
Secretary of State

DOCUMENT # J27874 (3)

1. Corporation Name

SUNCOAST NON-FERROUS CASTINGS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
2880 46TH AVE N
ST PETERSBURG FL 33714
US

Mailing Address
PO BOX 7378
ST PETERSBURG FL 33734-7398
US

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
08/07/1986
4. FEI Number
58-1692042
5. Certificate of Status Desired
6. Election Campaign Financing
Trust Fund Contribution
7. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

g. Name and Address of Current Registered Agent
KNAPP, THOMAS W
2880 46TH AVE. N.
ST. PETERSBURG FL 33714

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 *Thomas W. Knapp* DATE 4-3-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
V KNAPP, CHRISTOPHER 719 PINELLAS APT 11 TIERRA VERDE FL
T KNAPP, CHERYL 221 SUNSET DR N ST PETERSBURG FL
P KNAPP, THOMAS W 221 SUNSET DR N ST PETERSBURG FL
DELETED
DELETED
DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE *Thomas W. Knapp* DATE 4-3-98 813-525-2502

CR2E034 (10/97)