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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J64659

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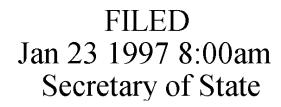
INDUSTRIAL CARBON BRUSHES, INC.

Principal	Piace	Of	Busines

Mailing Address

4135 N.W. 135TH STREET OPA LOCKA FL 33054

4135 N.W. 135TH STREET OPA LOCKA FL 33054-4615





			3. Date Incorporated or Qualified 3a. Date of Last Report 08/13/1996					
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For		
21 4093	3 N. W. 135TH St.	26 4093 N.W.	135TH	I St.	59-2789032	Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.				\$8.75 Additional		
	Locka Fla.	27 Opa-Locka	Fla.	33054	5. Certificate of Status Desired	Fee Required		
City & State		City & State	,	- 1 <u>-</u>	6. Election Campaign Financing	\$5.00 May Be		
23 33054		28 33054		la.	Trust Fund Contribution	Added to Fees		
Zip	 	Country Zip Country			8. This corporation has liability for intangible tax under s. 199.032,			
24 25 29 30 30 9. Name and Address of Current Registered Agent			[30]		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
<u></u>		negistered Agent		31 Name	10. Name and Address of New Registered A	Beur		
RODRIGUEZ, GUILLERMO 4050 N.W. 135TH STREET, #2 OPA LOCKA FL 33054				82 Street Address (P.O. Box Number is Not Acceptable)				
			1					
				83				
				53				
			la la	34 City		85 Zip Code		
			<u> </u>		<u>FL</u>	,		
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State c	and 607-1508, Florida Statu at Florida, Sach change was	ites, the abo	ove-named co	orporation submits this statement for the purpose of cration's board of directors. I bereby accept the appo	changing its registered		
agent La	m familiar with, and accept the obligat	ions of, Section 607.0505, F	lorida Statu	tes.	ration's board of directors. I hereby accept the appo	in brioni as registeres		
SIGNATURE								
	Signs we type it is printed mark to require entage of			Agent signature rei	quired when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	P	☐ DELETÉ	1.1 T(T),	E .	Rodriguez Guillekmo! 0093 NW 1355t. OPALOCKA Fl 33054	XI Change 🔲 Addition		
11001110000, 001111001110			1.2 NAN	AE .	1193 NW 135St.	;		
1		1.3 STR	EET ADDRESS 1	analogia Fl 22054	11			
C/TY+ST+ZIP	OPA LOCKA FL 33054		1.4 C(T)	r-ST-ZIP	OFALOCKA 1- 33047			
TITLE		☐ DELETE	2.1 T(T),	E		Change		
NAME			2.2 NAN	AE .				
STREET ADDRESS			. 2.3 STR	EET ADDRESS				
CITY-ST-ZIP			2 4 CHT	Y-ST-ZIP				
TITLE		☐ DELETE	3.1 T(TL	E		Change Addition		
NAME			3.2 NAM	AE				
STREET ADDRESS			3.3 STR	EET ADDRESS				
CITY-ST-ZIP			3.4. CIT	Y - ST-ZIP	•			
THE	······································	☐ DELETE	4.1 TITL	E		Change Addition		
NAME			4. 2 NA	ME:				
STREET ADDRESS			4.3 STR	EET ADDRESS				
C. TY - ST - ZIP			4.4 CiT1	r-ST-ZIP				
TITLE		DELETE	5.1 TrTL			Change Addition		
NAME			5.2 NAN	AE				
STREET ADDRESS		•	5.3 STR	EET ADDRESS				
City - S1 - ZIP				1-ST-ZIP				
TITLE		DELETE	6.1 TiTL			Change Addition		
NAME			6.2 NAM		•			
STREET ADDRESS				EET ADDRESS	•			
CHY-ST-ZIP	we contile that the information complised	u-th this tiling done not oug		r-ST-ZIP	ted in Section 119 07/3)(i) Florida Statutes I further	codify that the		

The majory earning that the information supplied with 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 altachment with an address.

SIGNATURE:

SNING OFFICER OR DIRECTOR