

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J64850 (7)

1. Corporation Name

SHEFFIELD PLATING CO.

Principal Place of Business

3581 N.W. 9TH AVENUE
FT. LAUDERDALE FL 33309

Mailing Address

3581 N.W. 9TH AVENUE
FT. LAUDERDALE FL 33309



3. Date Incorporated or Qualified
04/01/1987

3a. Date of Last Report
03/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0002251

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COCAINE, GREGORY
3581 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Gregory Cocaine

Pres.

AUG 5, 1996

Signature of Registered Agent and State Applicable

(Not to be signed by Registered Agent unless required by law)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME JIRSA, GEORGE C
STREET ADDRESS 2131 N.E. 32ND ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL ☒ DELETE

TITLE D
NAME JIRSA, COLLEEN A
STREET ADDRESS 2131 N.E. 32ND ST.
CITY-ST-ZIP LIGHTHOUSE PT. FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

11 TITLE P-D
12 NAME Gregory, Cocaine
13 STREET ADDRESS 2541 SW 58th Manor East
14 CITY-ST-ZIP Ft. Laud. FL 33302 ☒ Change ☐ Addition

21 TITLE STD
22 NAME Sherri Diane Cocaine
23 STREET ADDRESS 2541 SW 58th Manor East
24 CITY-ST-ZIP Ft. Laud. FL 33312 ☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary Cocaine

SIGNATURE AND TYPE OF OFFICIAL OF SIGNING OFFICER OR DIRECTOR

Aug 5, 1996

(954)
565-0162

CR2E034 (3/96)