

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY 22 11:10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L41940 (2)

1. Corporation Name:

METALFORMING EQUIPMENT, INC.

Principal Place of Business:

**% LOREN E. STEPHENSON
4154 RUSSELL ST
JUPITER FL 33469**

Mailing Address:

**% LOREN E. STEPHENSON
4154 RUSSELL ST
JUPITER FL 33469**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/08/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0160036

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. 199.12, Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business:

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2a. Mailing Address:

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

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City & State

City & State

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEPHENSON, LOREN E.
4154 RUSSELL ST.
JUPITER FL 33469**

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 607.04(2) and 607.15(6), Florida Statutes, the above named corporation certifies 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 607.04(2), Florida Statutes.

SIGNATURE

(Signature of Agent or Director, or of Registered Agent, if the Agent is a corporation)

(Signature of Registered Agent if registered agent is not a corporation)

(Date)

12. OFFICERS AND DIRECTORS

12.1 NAME

**D
STEPHENSON, LOREN E.
4154 RUSSEL ST.
JUPITER FL**

12.2 STREET ADDRESS

12.3 CITY, STATE, ZIP

12.4 CITY, STATE, ZIP

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1995 MAY 10 15

STATE OF FLORIDA
TALLAHASSEE

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L42051**

(7)

1. Corporation Name

PALM LAKES PRINTING, INC.

2. Principal Place of Business

**1970 R NW 55TH AVENUE
BUILDING H
MARGATE FL 33063**

2a. Mailing Address

**1970 R NW 55TH AVENUE
BUILDING H
MARGATE FL 33063**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Organization

01/12/1990

3a. Date of Last Report

05/01/1994

4. FFI Number

65-0134654

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 1993 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite Apt # etc.

22

City & State

23

Zip

24

25

County

26

Mailing Address

27

Suite Apt # etc.

28

City & State

29

Zip

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LONDON, BRUCE
272 NW 77TH AVENUE
APT 202-D
MARGATE FL 33063**

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 607.0802 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 provisions of Section 607.0805, Florida Statutes.

SIGNATURE

Bruce London

Bruce London

4/11/95

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D
2. NAME	LONDON, BRUCE
3. STREET ADDRESS	272 NW 77TH AVENUE
4. CITY & ZIP	MARGATE FL
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY & ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY & ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY & ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY & ZIP	

1. TITLE	D	☐ Change ☒ Addition
2. NAME	ZACHER, CRAIG	
3. STREET ADDRESS	860 SW 67TH AVE	
4. CITY & ZIP	N. Lauderdale, FL 33068	
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY & ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY & ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY & ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY & ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 139.07(1)(b), Florida Statutes. I further certify that the information included 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 it has changed or is an officer named with an address.

SIGNATURE:

Bruce London

Bruce London

4/11/95

968-4537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR