FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

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

3. Date Incorporated or Qualified: **01/08/1990**

3a. Date of Last Report: **05/23/1995**

2. Principal Place of Business
21 1750 S. Volusia Ave
Suite, Apt. #, etc.
22 Suite 5
City & State
23 Orange City,Fl
Zip 24 32763 Country 25 Volusia

2a. Mailing Address
26 P.O. 741228
Suite, Apt. #, etc.
27
City & State
28 Orange City,Fl
Zip 29 32774 Country 30 Volusia

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 unemployment tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name: **Stephenson, Loren E**
82 Street Address (P.O. Box Number is Not Acceptable): **977 Poncan Drive**
83 **Orange City, Fl 32763**
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1506, 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. The 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: LOREN E. STEPHENSON Loren E. Stephenson 3-26-96
Signature of New Registered Agent (if changing) Date

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	STEPHENSON, LOREN E.	
STREET ADDRESS	4154 RUSSEL ST.	
CITY-ST-ZIP	JUPITER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		☐ Change ☐ Addition
2 NAME		
3 STREET ADDRESS	977 Poncan Drive	
4 CITY-ST-ZIP	Orange City, Fl 32763	
5 TITLE		☐ Change ☐ Addition
6 NAME		
7 STREET ADDRESS		
8 CITY-ST-ZIP		
9 TITLE		☐ Change ☐ Addition
10 NAME		
11 STREET ADDRESS		
12 CITY-ST-ZIP		
13 TITLE		☐ Change ☐ Addition
14 NAME		
15 STREET ADDRESS		
16 CITY-ST-ZIP		
17 TITLE		☐ Change ☐ Addition
18 NAME		
19 STREET ADDRESS		
20 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is true, furnished and 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 added above.

SIGNATURE: Loren E. Stephenson Loren E. Stephenson 3-26-96 904-774-4044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date