

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 4:00

DOCUMENT # L85106

(7)

1. Corporation Name
METAL OX, INC.

Principal Place of Business
**2405 DIVISION AVENUE
12
WEST PALM BEACH FL 33407
US**

Mailing Address
**2405 DIVISION AVENUE
12
WEST PALM BEACH FL 33407
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/29/1990

3a. Date of Last Report
06/21/1994

4. FEI Number
65-0205161

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BENKLY, GEORGE M.
4363 B WILLOW POND RD
WEST PALM BEACH FL 33417**

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 607.0602 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

Signature (typed or printed name of registered agent and the agent's address)

(Typed) Registered Agent Signature (typed or printed name)

DATE

1/16/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	BENKLY, GEORGE M.
STREET ADDRESS	4363 B WILLOW POND RD
CITY, ST, ZIP	WEST PALM BEACH FL
TITLE	D
NAME	DEVITO, THOMAS E.
STREET ADDRESS	1235 PINE SAGE CIR
CITY, ST, ZIP	WEST PALM BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☒ Change ☐ Addition
22 NAME	DEVITO, THOMAS E.
23 STREET ADDRESS	1235 PINE SAGE CIR
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and claims not jointly for the exemption stated in Section 110 (3)(9)(K), Florida Statutes. I further certify that the information submitted 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. But I am not officer or director of the corporation, the officer or director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or any attachment, with an address.

SIGNATURE:

SIGNATURE AND TYPE ON PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

George M. Benkly

owner

1/12/95

(407) 659-1157