FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of diam

DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # L9500001003 ALUMINUM L.C.

3. Date Incorporated or Qualified 12 28 95 3a. Date of Last Report 510111996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0628002 67TH ST. P.O. BOX 25127 10200 N.W. Not Applicable Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be TAMARAC TAMARAC, Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, USA USA 33320 Yes No Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LARRY A. ROTHENBERG Street Address (P.O. Box Number is Not Acceptable)

BOCA REFLECTIONS - SuiTE 460 82 83 FEDERAL HIGHWAY ions 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered 11. Pursuant to the provisions in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered points of Section 607.0505, Florida Statutes. office or registered agen agent. I am familiar with SIGNATURE DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1171118 Change Addition SILVERSTEIN, ROBERT NAME 1.2 NAME 10200 N.W. 67th ST. STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY - ST - 7IP TAMARAC, FL 33321 CITY - ST - ZIP DELFTE Change 2.1 117(1 Addition TITLE SILVERSTEIN, LEON 10200 NW 67th ST. 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS TAMARAC, PL 33321 CITY-ST-ZIP 2 4 CHTY - ST - ZHP DELETE Change ___ Addition 3.1 JULE TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. C(1Y - \$1 - Z)P CITY-ST-ZIP DELFTE Addition Change 4.1 TILLE TITLE 4. 2 NAM[NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.Cl1Y+S1+7/P CITY-S1-ZIP DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. I do hereby certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the corporation or the receiver or tradec 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 attackment with an address.

54 CITY ST-7IP

6.3 STREET ADDRESS

6 1 111LE

6.5 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

LEON SILVERSTEIN 4-30-97 954-724-1775

100002207121 -06/10/97--01027--019

***173.75

Change

FILED

Jun 02 1997 8:00am

Secretary of State