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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M52441

(6)

STAINLESS METALWORKS INC.

Jun 09 1997 8	:00am
Secretary of	State

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Principal Place of Business Mailing Address							BIBII BIBII BIBII BIBII BI	TH	
14475 N.W. 26 AVE. OPA LOCKA FL 33054 OPA LOCKA FL 33054-3121									
						3. Date Incorporated or Qualified 05/20/1987	3a. Date of Last Report 04/16/1996		
<u>⊢</u>	Place of Business	2a. Mailing	Address			4. FEI Number		Applied For	
21 Suite Act	# ata	26			· ·	65-0012719		Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		5 Additional Required		
City & Sta	lte	City & S	State			6. Election Campaign Financing	\$5.0	0 May Be	
23 28			T		Trust Fund Contribution				
24	Zip Country Zip				Country 8. This corporation has liability for intangible tax under s. 199.032,			r s. 199.032,	
24	25 g. Name and Address of C	29 urrent Registered Ac	nent	30		Florida Statutes	Yes No		
DE/	/ILLA, ENRIQUE	3,0,0,0,0,0		8	Name	10. Name and Address of New Ast	Jistereu Agent		
	75 NW 26TH AVE			8:		ddress (P.O. Box Number is Not Acceptable)			
OP/	A LOCKA FL 33054				1				
				83	1				
1				84	City		85 Zi	p Code	
11 Pursuant	to the provisions of Sactions 60	7 0502 and 607 1508	Elorido Ctatut	os the sho	l	portion a device this et develop	FL ** ' '		
office or agent. I a	registered agent, or both, in the sam familiar with, and accept the i	State of Florida Such obligations of, Section	change was a 607.0505, Flo	es, the above authorized b orida Statute	y the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing I the appointment a	as registered	
SIGNATURE									
12,	Signature typed or printed name of register OFFICERS	S AND DIRECTORS	:. (NOTI	13.	etht Bignature requ	ind when rainstating)	DATE	200 (1) 40	
TITLE	P		DELETE	1.1 3111.6		ADDITIONS/CHANGES TO OFFIC	Change		
NAME	REVILLA, ENRIQUE	·		1.2 NAME			C. J. Orlange		
STREET ADDRESS	7844 S.W. 88TH CT			- I	T ADDRESS				
CITY-ST-ZIP	MIAMI FL			1.4 CITY					
TITLE	٧		DELETE	21 TITLE	-		☐ Change	Addition	
NAME	CRUZ, VICTOR V.			2.2 NAME					
STREET ADDRESS	8000 W. 16TH AVE			23 STREE	T ADDRESS				
CITY-ST-ZIP	HIALEAH FL			2. 4 CiTY-	ST - ZIP				
TITLE			DELETE	3.1 TITLE			Change	Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREE	I ADDRESS				
CITY-ST-ZIP				3.4 CITY-	\$1-7IP				
TITLE		l	_] DELETE	4.1 TITLE			Change	: Addition	
NAME				4. 2 NAME				ŀ	
STREET ADDRESS				4.3 STREE	I ADDRESS				
CITY-ST-ZIP			DELETE	4.4 CHY-	81 - ZIP				
TITLE		L	DELETE	51 TITLE			☐ Change	Addition	
NAME STORET ADDOCCO				5.2 NAME				{	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		Т	DELETE	5 4 CHY-1	st - ZIP	***	Change	Addition	
NAME		ι	_ PELLIE	6.1 THILE			[] Guange	Addition	
STREET ADDRESS				6.2 NAM6	ADDRESS				
CITY-ST-ZIP					ADDRESS				
OHIT SITE				G.4 CITY - S	1 - ZII'				

14. I do hereby certify that the information supplied with this filing 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 eath; 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 it changed, or on an attachment with an address.