LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FORIDA OF PARTY INCHEMENT OF STATE SOCIETARY OF STATE OUTSING OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Of LIMITED LIABILITY COMPANY ATRIPORT METALS, LLC 6099 TRIANGLE DRIVE COMMERCE CA 90040 2 Pricepa Flace of Business Assers AIRPORT METALS, LLC 6099 TRIANGLE DRIVE COMMERCE CA 90040 2 Pricepa Flace of Business Assers Solido, April 1 86 2 Pricepa Flace of Business Assers Solido, April 1 86 3 Date Opinion of Dutified Drive Company April Metals Solido, April 1 86 3 Date Opinion of Dutified Opinion of Dut		or before May 1, 1999 or	Limited	l Liability Com	pany will be	•			
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To Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM 12 CO SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Street Address (P.O. Box Number is Not Acceptable) Suite. Apt. #, etc. City FL Zip Code 6. Pursuant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above named limited liability company submits this statement for the purpose of changing its registered agent, and accept the obligations. SIGNATURE Registered Agent A			,				27037		Applied For
2.0 Country 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Typ Code FL 2.p Code FL 2.p Code FL 3.0 Pursuant to the provisions of Sections 608,416 and 609,508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing registered office or registered agent, or both, in the State of Florida Such change was authorized by affirmative vote of a majority of the members. Therefore accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Agent Acceptes Agents agent. Business Street Address City, State and Zip Code MGR BLIVAS, LARRY 60.99 TRIANGLE DRIVE COMMERCE CA 900470 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i), Florida Statutes. Further certify that the information decladed on this annual report is true and accurate and that my signature shall have the same legal office as if made under cath, that I am a managing member or manager of timited liability company of the receiver or trustee employed to secoute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on assistance and managing member or manager of timited liability company of the receiver or trustee employed to secoute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on assistance and managing member or managin	ODA LOCKA. FL			ate					Not Applicable
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9. Pursuant to the provisions of Sections 608.416 and 608.508. Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing the registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE Pregistered Agent Accepting Asystems and In-OTE Pregistered Agent	1200	SOUTH PINE ISLAND		`		s Not Acceptab	le)		
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing is registered office or registered office or registered agent, and accept the obligation. SIGNATURE [Registered Agent Accepting Agricultural Properties of the control of the provision of the members is hereby accept the appointment as registered agent, and accept the obligation. SIGNATURE [Registered Agent Accepting Agricultural Provision of the provisi					City	· <u>·</u>		Zip Code	
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