4-20-98B-5060 -C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P264

.6426 (

CHROMALLOY CASTINGS MIAMI CORPORATION

Principal Place of Business Mailing Address C/O SEQUA CORP HACKENSACK NJ 19801 US CHROMALLOT CASTINGS MIAMI CORPORATION Mailing Address C/O SEQUA CORP HACKENSACK NJ 19801 US					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 10/12/1989
2. Principal Place of Business		2a. Mailing Address	· 		4. FEI Number Applied For
21		26			65-0152141 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required
City & State		City & State			
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid the current year Intangible
24 0760	J 25	29 07601	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	ent Registered Agent	<u></u>		10. Name and Address of New Registered Agent
CT	CORPORATION SYSTEM			B1 Name	e
1200 \$. Pine Island road Plantation Fl. 33324			-	82 Street	et Address (P.O. Box Number is Not Acceptable)
			1		
			,	83	
			1	84 City	E 85 Zip Code
44 Pureuant	to the provisions of Sections 607 Of	02 and 607 1509. Elected Status	too the ab	oue pemod	9 2 1
office or	egistered agent, or both, in the State	te of Florida. Such change was	authorized	by the cor	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
]	im f amiliar with, and accept the obli	gations of, Section 607.0505, FI	orida Statu	rtes.	
SIGNATURE	Signitiums, typed or printed name of registered in	gent and bile it applicable (NOI	L: Registered	Agent signature	.ire required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CD	DFLETE	1.1 1010	.E	ASSISTANT TAX OFFICER Change MAddition MICHAEL BLICKENSDER FER
NAME	WEINSTEIN, MARTIN		1.2 NAM	ΛE	MICHAEL PLICKENSDER FER
STREET ADDRESS	4430 DIRECTOR DRIVE		1.3 STR	EET ADDRESS	2 (1) 11 mas 17 V PLAZA
CITY-ST-ZIP	<u>\$A</u> N ANTONIO TX		1.4 CIT	Y-ST-ZIP	3 UNIVERSITY PLAZA HACKENSACK, DJ 07501
TITLE	P	☐ DELETE	2.1 TITE	E	Change Addition
NAME	WENDT, THOMAS		2.2 NAM	AE .	
STREET ADDRESS	4701 NW 77TH AVE		2.3 STR	EET ADDRESS	5
CITY-\$T-ZIP	MIAMI FL		2. 4 CIT	Y-S1-71P	
TITLE	AVP	☐ DELETE	31 111	E	☐ Change ☐ Addition
NAME	BINDER , KENNETH		3.2 NAN	AE.	
STREET ADDRESS	4430 DIRECTOR DRIVE		3.3 STR	EET ADDRESS	3
CITY-ST-ZIP	SAN ANTONIO TX	—		Y - ST - ZIP	
TITLE	VPT	☐ DELETE	4.1 TiTL		Change Addition
NAME	DRUCKER, KENNETH A.		4. 2 NA		
STREET ADDRESS	200 PARK AVE		4.3 STR	EET ADDRESS	
CITY-ST-ZIP	NEW YORK NY			r-ST-ZIP	
TITLE	VPT	☐ DELETE	5.1 TITL		☐ Change ☐ Addition
NAME	ADLMAN, MONROE		5.2 NAN	4E	1

14. I 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 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 on an altachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELFTE

araamaa aa

200 PARK AVE.

NEW YORK NY

ST. LOUIS MO

DOWLING, JOHN J., III

120 SOUTH CENTRAL AVE.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

HINDER PLANE CLICK OF PER PLANE () - 1 21/2 LINE

☐ Change

Addition

FILED

Apr 20 1998 8:00am

Secretary of State