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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORFORATIONS

DOCUMENT # P30125

(9)

ACCURA MOLD, INC.

STREET ADDRESS

CITY-ST-ZIP

Principal Plac	e of Business	Mailing /	Mailing Address				T INDIANAL IND INIT ON THE SERVE BY BE DEED		I DI I GEBEL BARA	
MOSE N. 29TH A MOLLYWOOD F			4036 N. 28TH AVE. HOLLYWOOD FL 33020-1012							
							3. Date Incorporated or Qualified 07/10/1990		ate of Last R 23/1996	leport
2. Principal P	lace of Business	2a. Maili	ig Address				4. FEI Number	.1		pplied For
21		h1	26				56-1572154		h	ot Applicable
Suite, Apt.	#, etc.		Suite, Apt #, etc.							Additional
22		27	[27]				5. Certificate of Status Desired	LJ		equired
City & Stat	е	City 8	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zip	Country	Ζıp	Zip Coi		try		8. This corporation has liability for			s. 199.032,
24	25	25 29 30		30			Florida Statutes	Yes [□ No	
	9. Name and Address of Curr	ent Registered	Agent		- · · ·		10. Name and Address of New Re	gistered	Agent	
	los, Kenneth			8	31	Namo				
	S SCOTT ST.				32	Street Ari	idress (P.O. Box Number is Not Acceptate	ilo)		·
HOL	LYWOOD FL 33020					2.7 2.0 () ()	the state of the s	,		i
				6	33					
1				6	34	Cily			85 Zip (Code
								FL		
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607,150 te of Florida, Suc	8, Florida Statu di change was	tes, the abo authorized	by	-named co the corpor	orporation submits this statement for the pration's board of directors. I hereby acceptation's	urpose of of the app	changing it ointment as	ls registered registered
SIGNATURE	m tamiliar with, and accept the ob-	igations of, Secti	on 607.0505, FI	orida Statu	ies.	•				
SIGNATORE	Signature, typed or printed name of registered a	igent and title if applica	able (NO)	Hegistered i	Ager	Tis gnature rec	pared when reinstating)	DATE		
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	
TITLE	PO		DELFTE 11		11100				Change	🔀 Addition
NAME	KHOLOS, KENNETH			1.2 NAN	A E					
STREET ADDRESS	2645 SCOTT ST.		1.3 \$		1.3 STREET ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL		·		1.4 C/TY+S1 - Z/P					
TALE	VD	-		2 1 TITL	2.1 TITLE				Change	☐ Addition
.name	FARRELL, GREGORY		554		2 2 NAME					
STREET ADDRESS	2600 SAMPSON RD.		2.3 \$		2.3 STREET ADDRESS					
CITY-ST-ZIP	WATERFORD PA				Y-SI	T-ZIP				
TITLE	\$0			3 1 TITL	f				Change	Addition
NAME	HAIBACH, VINCENT		3.2 N		1É					
STREET ADDRESS	883 N.E. 34TH ST.			3.3 STRI	EE1.4	ADDRESS				
CITY-ST-ZIP	ZIP FT. LAUDERDALE FL			3 4. CITY - S		1 - ZIP				İ
TITLE	DELETE		4.1 THE	4.1 TILLE				Change	Addition	
NAME				4. 2 NA	Иŧ					
STREET ADDRESS				4.3 STR	EET A	ADORESS				
CITY - ST - ZIP	4		4.4 C(1)	r-\$1	- 20P					
TITLE	.e		DELETE			<u>†</u>			Change	Addition
NAME				5.2 NAM	'E					
STREET ADDRESS				5.3 STRE	EET A	ADDRESS .				
CITY-ST-ZIP				5.4 CHY						
TITLE			DELETE	6.1 101					Change	Addition
NAME				6.2 NAME					-	

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(·), 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 if changed, or on an attachment with an address.