

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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MAY 23 11:10:15

SECRETARY OF STATE
TREASURY, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30792**

(6)

1. Corporation Name

ALLIED MECHANICAL TRADES, INC.

Principal Place of Business

**343 EAST 66TH ST.
NEW YORK NY 10021**

Mailing Address

**343 EAST 66TH ST.
NEW YORK NY 10021**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified

07/30/1990

3a. Date of Last Report

02/01/1994

4. FEI Number

13-2620143

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. This corporation has liability for intangible tax under S. 199 (1)(f),
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Country

28

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**OSTRAU, NORMAN M.
8181 WEST BROWARD BLVD.,
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.040, and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.040(5), Florida Statutes.

SIGNATURE

(Signature of Registered Agent required when incorporated)

(Signature of Registered Agent required when incorporated)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME

**CP
DEUTSCH, BEULAH
343 E. 66TH ST.
N.Y. NY**

1. TITLE

☐ Change ☐ Addition

STREET ADDRESS

2. NAME

CITY, ST., ZIP

3. STREET ADDRESS

4. CITY, ST., ZIP

☐ Change ☐ Addition

NAME

**VC
DEUTSCH, ARTHUR
343 E. 66TH ST.
N.Y. NY**

5. TITLE

☐ Change ☐ Addition

STREET ADDRESS

6. NAME

CITY, ST., ZIP

7. STREET ADDRESS

8. CITY, ST., ZIP

☐ Change ☐ Addition

NAME

**ST
DEUTSCH, ARTHUR
343 E. 66TH ST.
N.Y. NY**

9. TITLE

☐ Change ☐ Addition

STREET ADDRESS

10. NAME

CITY, ST., ZIP

11. STREET ADDRESS

12. CITY, ST., ZIP

☐ Change ☐ Addition

NAME

13. TITLE

☐ Change ☐ Addition

STREET ADDRESS

14. NAME

CITY, ST., ZIP

15. STREET ADDRESS

16. CITY, ST., ZIP

☐ Change ☐ Addition

NAME

17. TITLE

☐ Change ☐ Addition

STREET ADDRESS

18. NAME

CITY, ST., ZIP

19. STREET ADDRESS

20. CITY, ST., ZIP

☐ Change ☐ Addition

NAME

21. TITLE

☐ Change ☐ Addition

STREET ADDRESS

22. NAME

CITY, ST., ZIP

23. STREET ADDRESS

24. CITY, ST., ZIP

☐ Change ☐ Addition

SIGNATURE:

Arthur Deutsch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OFFICER OR DIRECTOR

1506

Telephone 336-2222

