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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P94000004219

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21, 1999 8:00 am Secretary of State 04-21-1999 90132 019 ***150.00

| L&FAL | LUMINIUM, INC. | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------|---------------|--------------|-----------|-----------|------------------------------------------------------------------|----------------------------------|-----------------|
| Deineinal Black | o of Business | Mailing Addres | | | | | K INN SIANA KANDARA SIANA KANDA MARAKA BARAKA NAMAKA NAMAKA NAMA | 84) 4 48) 4 (668) | 11818 1811 1881 |
| Principal Place of Business Mailing Address 6571 43RD ST N 5611 66TH AVENUE NORTH UNIT 1703 PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 US | | | | | | ļ | DO NOT WRITE IN THIS | SPACE | |
| US | | | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | | | 01/10/1994 | | i i |
| 2 Principal P | lace of Business | 2a. Mailing Add | Iress | | | | 4. FEI Number | T Ap | plied For |
| — | ¬ | | | | | | 59-3228382 | | t Applicable |
| 21 | | | | | | | 35 3220302 | \$8.75 | |
| | | | | | | ļ | 5. Certifcate of Status Desired | Fee Re | |
| 22 | 2 27 City & State City & State | | | | - | | | | |
| | | | | | | | 6. Election Campaign Financing | \$5.00 Added | |
| 23 28 | | | | | | | Trust Fund Contribution | | o rees |
| Zip | Country | Zip | _ | Country | | | 8. This corporation owes the current year Int | | V |
| 24 | 25 | 29 | 30 | | | | Personal Property Tax. | Yes | No |
| | 9. Name and Address of Curren | t Registered Agent | <u>t</u> | | | | 10. Name and Address of New Registered | Agent | |
| | A. 100. 1 1111 1 | | | 81 | Name | | | | • |
| BALCHEN, HANS L | | | | 82 | Street | Addres | ss (P.O. Box Number is Not Acceptable) | | |
| 5611 66TH AVE. NORTH | | | | | | | , , , , , , , , , , , , , , , , , , , , | | |
| PINELLAS PARK FL 33781 | | | | 83 | - | | | | |
|) * | • | | | | <u></u> | | | | |
| 1 | | | | 84 | City | | FL | 85 Zip (| Code |
| L | | 0 1 007 4500 FI | -1- Ca-4-4 AL | | | | | changing its | registered |
| 11. Pursuant to the provisions of Sections 607.0502 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 obligation of, Section 607.0505, Florida Statutes. SIGNATURE | | | | | | | | | |
| Signalure, typed or printed name of registered agent and title if applicable. /NOTE: Registered Agent si | | | | | | equired w | when reinstating) DATE | | |
| 12. | OFFICERS AN | D DIRECTORS | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTO | |
| TITLE | D | | DELETE | 1.1 TITLE | | V | ICE PRESIDENT | Change | Addition |
| NAME | BALCHEN, HANS L JR | | · · | 1.2 NAME | | ~ | SZUG-85 TERR SZUG-85 TERR PINCULAS PARK FL | | |
| STREET ADDRESS | 5611 66TH AVENUE NORTH | | | 1.3 STREET | TADDRESS | ' | 5266 - 85 TERR | CT | į |
| CITY-ST-ZIP | PINELLAS PARK FL | | | 1.4 CITY-S | T. 71D | 6 | PANG EL | 33 | フェル |
| TITLE | THREED TO TOUR TE | C. | | 2.1 TITLE | 1-21 | - | 0-00-00 | 33 □Change | Addition |
| } | | _ | | | ļ | \ \ \ | CCRETARY | `` | ~ |
| NAME | | | | 2.2 NAME | | C | HRISTIAN BALCHE, | ب | ļ |
| STREET ADDRESS | 1 | | 1 | 2.3 STREE | TADORESS | 5 | 101-22 Mr. #10 | 6 | , |
| CITY-ST-ZIP. | e a grant de la companya de la compa | <u> </u> | | 2:4 CITY-8 | T-ZIP | S | T-Petersburg Fc | | / () |
| TITLE | | | DELETE : | 3.1 TITLE | | 1 | $\mathcal{O}_{\mathbb{R}}$ | ∟∟cnange | Addition |
| NAME | | | i : | 3.2 NAME | | | | | |
| STREET ADDRESS | | | . | 3.3 STREET | ADDRESS | | | | J |
| CITY-ST-ZIP | | | I : | 3.4. CITY- 9 | ST-ZIP | | | | |
| TITLE | | | | 4.1 TITLE | | <u> </u> | | Change | ☐ Addition |
| NAME | · · | | | 4. 2 NAME | | | • | | į |
| ŀ | | | | | TADDOFFEE | | • | | ł |
| STREET ADDRESS | | | 1 | | TADDRESS | | | | ſ |
| CITY-ST-ZIP | <u> </u> | | | 4.4 CITY-S | I-ZIP | - | | Change | Addition |
| TITLE | J | L | | 5.1 TITLE | | | | change | |
| NAME |] | | | 5.2 NAME | | | | • | |
| STREET ADDRESS | 1 | | . | 5.3 STREE | TADORESS | 1 | | | ļ |
| CITY-ST-ZIP | l | | [: | 5,4 CITY-S | T-ZIP | <u> </u> | | | |
| TITLE | , | | DELETE | 6.1 TITLE | | | | Change | ☐ Addition |
| NAME | | | | 6.2 NAME | | Ì | , | • | " |
| | 1) | | | 6.3 STREF | T ADDRESS | | | | |
| -STREET ADDRESS | | | | | | 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 attachment with an address, with all other like empowered.

SIGNATURE: