

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

FILED
May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P94000011937 (7)

1. Corporation Name
ADVANCED METAL STRIPPING, INC.



Principal Place of Business
6399 - 142ND AVENUE NORTH CLEARWATER FL 34620

Mailing Address
6399 - 142ND AVENUE NORTH CLEARWATER FL 34620

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	02/09/1994	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	59-3238173	
24	Country	29	Country	Applied For	
25		30		Not Applicable	
5. Certificate of Status Desired				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Certificate of Status Desired				\$8.75 Additional Fee Required	
<input type="checkbox"/>				\$5.00 May Be Added to Fees	
<input type="checkbox"/>					

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MCCLOSKEY, JACK G 1341 WEXFORD DR N PALM HARBOR FL 34683				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL 33740			

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 agent 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 607.0505, Florida Statutes.

SIGNATURE Jack G. McCloskey Pres. Paul G. M. ... Pres. 4-24-98
Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE		<input type="checkbox"/> DELETE	1.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P		1.2 NAME				
STREET ADDRESS	MCCLOSKEY, JACK G		1.3 STREET ADDRESS				
CITY-ST-ZIP	6399 142ND AVE N. STE 124		1.4 CITY-ST-ZIP				
	CLEARWATER FL		2.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> DELETE	2.2 NAME				
NAME			2.3 STREET ADDRESS				
STREET ADDRESS			2.4 CITY-ST-ZIP				
CITY-ST-ZIP			3.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> DELETE	3.2 NAME				
NAME			3.3 STREET ADDRESS				
STREET ADDRESS			3.4 CITY-ST-ZIP				
CITY-ST-ZIP			4.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> DELETE	4.2 NAME				
NAME			4.3 STREET ADDRESS				
STREET ADDRESS			4.4 CITY-ST-ZIP				
CITY-ST-ZIP			5.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> DELETE	5.2 NAME				
NAME			5.3 STREET ADDRESS				
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP			6.1 TITLE				<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> DELETE	6.2 NAME				
NAME			6.3 STREET ADDRESS				
STREET ADDRESS			6.4 CITY-ST-ZIP				
CITY-ST-ZIP							

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.

SIGNATURE: Paul G. M. ... Pres. Jack G. McCloskey Pres. 4/24/98 (815) 538-2210

CF2E034 (10/97)