OCUMENT # P9400011937 Entity Name ADVANCED METAL STRIPPING, INC.					FILED Apr 06, 2000 8:00 a Secretary of State				
েন্দ্ৰ Place of Business Mailing Address									
- 142ND AVENUE NORTH 124		6399 - 142ND AVENUE NORTH UNIT 124 CLEARWATER FL 33760-2728				04-06-200	00 90053	3 044 ***	*150.00
				_					
		Suite, Apt. #, etc.			- D	O NOT WRITE I	IN THIS SPA	ACE	
City & Stat	te A M	City & Staff		4. F	El Number 59	9-3238173		_ 	plied For t Applicable
Zip –	Country	Zip	Country	5. C	ertificate of Statu	us Desired		8.75 Add	itional
	6. Name and Address of Current	Name	7. N	ame and Addre	ss of New Reg	istered Ag	ent		
MCCLOSKEY, JACK G				Street Address (P.O. Box Number is Not Acceptable)					
5933 140TH TERRACE NORTH CLEARWATER FL 33760					SAN	1c			
			City				FL	Zip Code	9
	e named entity submits this statement for statement for signature. Typed or printed harme of registered agent	and title if applicable. (N	its registered office or re		<u> </u>	e State of Florid			
.niaTuiRE This corpo Tax filing t		and title if applicable. (N FILE NO After MAY 1,	tits registered office or re	required when rei	nstating) 10. Election C	e State of Florid campaign Finan d Contribution.	a. DATE		0 May Be I to Fees
.niaTuiRE This corpo Tax filing t	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangibli requirement and elects to do so. In an back)	and trie if applicable. (No. After MAY 1, Make Check Pay	vote: Registered Agent signature W!!! FEE IS \$150.00 2000 Fee will be \$550 yable to Department of	required when rei 0.00 f State	nstating) 10. Election C	ampaign Finan	DATE cing	Added	I to Fees
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.