


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

FILED

May 19 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 | |  | | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | |
| DOCUMENT # P94000023636 (1) 1. Corporation Name NATIONAL METALWORKING CORPORATION | | | | | |
| Principal Place of Business 130 SCARLET BLVD. OLDSMAR FL 34677 | | Mailing Address 130 SCARLET BLVD. OLDSMAR FL 34677-3002 | | | |
| 2. Principal Place of Business 21 12340 66th St. N. Suite, Apt. #, etc. 22 City & State 23 Largo, FL Zip 24 33773 | | 2a. Mailing Address 26 12340 66th St. N. Suite, Apt. #, etc. 27 City & State 28 Largo, FL Zip 29 33773 | | 3. Date Incorporated or Qualified 03/28/1994 3a. Date of Last Report 05/01/1996 4. FEI Number 59-3233157 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 9. Name and Address of Current Registered Agent EHLERS, STEPHEN B 130 SCARLETT BLVD. OLDSMAR FL 34677 | | 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 12340 66th St. N. 83 84 City Largo 85 Zip Code FL 33773 | | | |
| 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 obligations of, Section 607.0505, Florida Statutes | | | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) | | | | | |
| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE <input type="checkbox"/> DELETE NAME D EHLERS, STEPHEN B STREET ADDRESS 130 SCARLET BLVD CITY-ST-ZIP OLDSMAR FL | | | 1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME President/Treasurer 1.3 STREET ADDRESS Stephen B. Ehlers 1.4 CITY-ST-ZIP 12340 66th St. N. 2.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME Secretary 2.3 STREET ADDRESS Robert Barron 2.4 CITY-ST-ZIP 700 S. Federal Hwy, Ste. 200 3.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3.2 NAME Chairman of the Board 3.3 STREET ADDRESS Stephen L. Gurba 3.4 CITY-ST-ZIP 12340 66th St. N. 4.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME Director 4.3 STREET ADDRESS G.L. Shapiro 4.4 CITY-ST-ZIP 700 S. Federal Hwy, Ste. 200 5.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME Director 5.3 STREET ADDRESS K.B. Stein 5.4 CITY-ST-ZIP 700 S. Federal Hwy, Ste. 200 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | |

SIGNATURE: _____

4-30-97

813.531.2828

CR2E034 (9/96)