

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

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
95 JUL 10 AM 10:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000024308 (6)

1. Corporation Name

METAL-EAGLE, INC.

Principal Place of Business

10030 S.W. 40TH ST.  
MIAMI FL 33165

Mailing Address

10030 S.W. 40TH ST.  
MIAMI FL 33165

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/30/1994

3a. Date of Last Report

2. Principal Place of Business

21. 15447 SW 99 LANE

2a. Mailing Address

21. 15447 SW 99 LANE

4. FEI Number

62-0484364

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23. Miami FL

City & State

23. Miami FL

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

24. 33196

25. USA

29. 33196

30. USA

8. The corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAST, LOUIS F  
10030 S.W. 40TH ST.  
MIAMI FL 33165

81. Name

JOSE G. MONSERRATTE

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

15447 SW 99 LANE

83.

84. City

MIAMI - FL

FL

85. Zip Code

33196

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 607.0508, Florida Statutes.

SIGNATURE

JOSE G. MONSERRATTE

(NOTE: Registered Agent signature required when reappointing)

DATE

JUL 29 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                 |                      |
|-----------------|----------------------|
| TITLE           | PSD                  |
| NAME            | RICO, ALVARO V       |
| STREET ADDRESS  | 9743 S.W. 138TH AVE. |
| CITY - ST - ZIP | MIAMI FL 33188       |
| TITLE           | VD                   |
| NAME            | MONTERO, GIOVANNY    |
| STREET ADDRESS  | 9743 S.W. 138TH AVE. |
| CITY - ST - ZIP | MIAMI FL 33188       |
| TITLE           | TD                   |
| NAME            | MONSERRATTE, JOSE G  |
| STREET ADDRESS  | 9743 S.W. 138TH AVE. |
| CITY - ST - ZIP | MIAMI FL 33188       |
| TITLE           |                      |
| NAME            |                      |
| STREET ADDRESS  |                      |
| CITY - ST - ZIP |                      |
| TITLE           |                      |
| NAME            |                      |
| STREET ADDRESS  |                      |
| CITY - ST - ZIP |                      |
| TITLE           |                      |
| NAME            |                      |
| STREET ADDRESS  |                      |
| CITY - ST - ZIP |                      |

|                     |                                                                   |
|---------------------|-------------------------------------------------------------------|
| 1.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME            |                                                                   |
| 1.3 STREET ADDRESS  |                                                                   |
| 1.4 CITY - ST - ZIP |                                                                   |
| 2.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME            |                                                                   |
| 2.3 STREET ADDRESS  |                                                                   |
| 2.4 CITY - ST - ZIP |                                                                   |
| 3.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME            |                                                                   |
| 3.3 STREET ADDRESS  |                                                                   |
| 3.4 CITY - ST - ZIP |                                                                   |
| 4.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME            |                                                                   |
| 4.3 STREET ADDRESS  |                                                                   |
| 4.4 CITY - ST - ZIP |                                                                   |
| 5.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME            |                                                                   |
| 5.3 STREET ADDRESS  |                                                                   |
| 5.4 CITY - ST - ZIP |                                                                   |
| 6.1 TITLE           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME            |                                                                   |
| 6.3 STREET ADDRESS  |                                                                   |
| 6.4 CITY - ST - ZIP |                                                                   |

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Here #