

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000060165 (5)**

1. Corporation Name

GILES ALUMINUM, INC.



Principal Place of Business

**1618 1ST AVENUE WEST
BRADENTON FL 34205**

Mailing Address

**1618 1ST AVENUE WEST
BRADENTON FL 34205**

2. Principal Place of Business

21 **1319 36TH ST. WEST**

Suite, Apt. #, etc.

22

City & State

23 **BRADENTON, FL. 34205**

Zip

24 **34205**

Country

25 **U.S.A.**

2a. Mailing Address

26 **1319 36TH ST. WEST**

Suite, Apt. #, etc.

27

City & State

28 **BRADENTON, FLORIDA**

Zip

29 **34205**

Country

30 **U.S.A.**

3. Date Incorporated or Qualified

08/16/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0517974

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GILES, RUTH A

**1618 1ST AVE WEST
BRADENTON FL 34205**

10. Name and Address of New Registered Agent

81 Name

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

1319 36TH ST. WEST

83

84 City

BRADENTON, FLORIDA

FL

85 Zip Code

34205

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

Signature type for printed name of registered agent or director

Signature type for printed name of registered agent or director

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME
D GILES, PAUL
STREET ADDRESS
1618 1ST AVE. WEST
CITY-ST-ZIP
BRADENTON FL 34205

☐ DELETE

TITLE

NAME
D GILES, RUTH
STREET ADDRESS
1618 1ST AVE. WEST
CITY-ST-ZIP
BRADENTON FL 34205

☐ DELETE

TITLE

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TITLE

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D GILES, RUTH
STREET ADDRESS
1618 1ST AVE. WEST
CITY-ST-ZIP
BRADENTON FL 34205

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

**1319 36TH ST. W.
BRADENTON, FL. 34205**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

**1319 36TH ST. W.
BRADENTON, FL. 34205**

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

**300001807913
-05/06/96--01010--003**

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

*****208.75**

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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 119.07(3)(k), Florida Statutes, 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:

Ruth Giles **Ruth Giles**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96 941-750-8347
DATE TELEPHONE

CR2E034 (12/95)