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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000011437 (7)

J.T. ALUMINUM INC.

0.11.7.2.0						
Principal Place	e o' Business	Mailing Address				
3736 SOUTHVIEW DRIVE BRANDON FL 33511		3736 SOUTHVIEW I BRANDON FL 3351				
				3. Date Incorporated or Qualified 02/08/1995	3a. Date of Last Report 03/26/1996	
2. Principal Pt	ace of Business	2a. Mailing Addres	S	4. FEI Number 59-3295498	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, et	ic.	5. Certificate of Status Desired	\$8.75 Additional	
22 2 City & State		27 City & State		6. Election Campaign Financing	Fee Required	
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for		
24	25 9. Name and Address of Curre	29	30		Yes No	
	····	nt Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
	.Brook, patricia a 6 Southview Drive					
BRANDON FL 33511			82 Street Add	Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84 City		FL 85 Zip Code	
SIGNATURE				poration submits this statement for the p tion's board of directors. I hereby accep		
12.	Signature, typical or printed name of registered as OFFICERS At	gent and title if applicable ND DIRECTORS	(NOTE: Registered Agent signature requi	ired when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE PEDE AND DIDECTORS IN 40	
TITLE	D	DELE		ADDITIONS/CHANGES TO OFFIC	Change Addition	
NAME	TILLBROOK, PATRICIA A		1.2 NAME			
STREET ADORESS	3736 SOUTHVIEW DRIVE		1.3 STREET ADDRESS			
C(TY+ST+Z)P	BRANDON FL 33511		1.4 CITY - ST - ZIP			
TITLE	D	☐ DELE			Change Addition	
NAME STREET ADDRESS	TILLBROOK, JOHN R 3736 SOUTHMEW DRIVE		2.2 NAME			
CITY-ST-ZIP	BRANDON FL 33511		2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP			
TITLE	D	DELE			☐ Change ☐ Addition	
NAME	DAY, STEVEN		3.2 NAME		•	
STREET ADDRESS	4856 DOUBLE D CIRCLE		3.3 STREET ADDRESS			
CITY+ST-ZIP	TAMPA FL 33610		3.4. CITY-ST-ZIP			
TITLE		DELE			Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP TITLE	of Arts decreased to the best consistence and an arrangement and also are	DELE	TE 5.1 TITLE	<u></u>	Change Addition	
NAME			5.2 NAME	**		
STREET ADDRESS			5.3 STREET ADDRESS			
C-TY - ST - ZIP			5 4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE		☐ DELE	TE 6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
14. I do hereb	ov certify that the information supplies	ed with this filing does no	64 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statute	is I further certify that the	
informatio Lam an of	n Indicated on this annual report or	supplemental annual report the receiver or trustee e	ort is true and accurate and that empowered to execute this repo	t my signature shall have the same legs rt as required by Chapter 607, Florida S	al effect se it made under eath: that l	

FILED

Mar 04 1997 8:00am

Secretary of State