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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000013877 (2)

FLORIDA METALS GROUP INC.

_	
Principal Place of Business	Mailing Address
6889 FIREBIRD DRIVE ORLANDO FL 32810	6889 FIREBIRD DRIVE ORLANDO FL 32810

FILED May 04 1998 8:00am Secretary of State



6889 FIREBIR ORLANDO FL		6889 FIREBIRD DRIVE ORLANDO FL 32810				DO NOT WRITE IN THIS S	SPACE	
						3. Date Incorporated or Qualified 02/16/1995		
	ace of Business	2a. Mailing Address	-			4. FEI Number	L	Applied For
21		26				59-3309873		Not Applicab
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required
City & State		City & State	_			Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees
Zip 24	Country 25	Ζφ 29	Cour 30	ilry			Yes	r Intangible
	9. Name and Address of Currer	it Registered Agent		T		10. Name and Address of New Registered	Agent	
	NALD J. PATTERSON		ľ	81	Name			
	89 FIREBIRD DR. RLANDO FL 32810			82	Street Add	Iress (P.O. Box Number is Not Acceptable)	-	
			[В3				
			Ī	84	City	FL	85	Zip Code
office or re	o the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the oblig	∘of Horida. Such change was	authorized	bγ	the corpora	rporation submits this statement for the purpose of attom's board of directors. I hereby accept the appropriate the submitted in the submitted	changi ointmer	ng its registere It as registered
SIGNATURE								
	Signature, typed or profed name of registered age OFFICERS AN		111 · flegistered	Ager	it signature requ	prod wher reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDEC	TODE IN 12
12.	DITICENS AN	DELETE	1.1 IIII	F		ADDITIONS/CHANGES TO OFFICERS AND	Cha	
NAME	PATTERSON, RONALD JACK		1.2 NA					.go
STREET ADDRESS	6889 FIREBIRD DRIVE	JOH			ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32810		1.4 CIT					
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NAME	PATTERSON, ZORAYA S.		2.2 NAM	ME.				-
STREET ADDRESS	6889 FIREBIRD ST.				ADDRESS			
CITY-ST-ZIP	ORLANDO FL		2 4 CIT					
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CITY-ST-ZIP			3.4. CIT	Y- \$1	1 - ZiP			
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NAME			4. 2 NA	ME				
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NAME			6.2 NAM	ИE				
STREET ADDRESS			6.3 STR	EET A	ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y-ST	-ZIP	Carlina 440 07(0)(3) Florida Cratida I furba an		

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 informatio 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