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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. M. rtham Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT 1. Corporation Name	# P95000020314	(7)
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DIMENSIONAL FABRICATIONS, INC.

DIMEN	SIONAL FABRICATIONS, II		1 10 1 10 1 10 1 10 10 10 10 10 10 10 10				
Principal Place of Business 4220 N.W. 2ND AVE. MIAMI FL 33127		Mailing Address 4220 N.W. 2ND AVE. MIAMI FL 33127	4220 N.W. 2ND AVE.				
				3. Date Incorporate 03/09/199	or Qualified 3a. Da	ite of Last Report	
2. Principal Place	e of Business	2a. Mailing Address		4. FEI Number 65-05 6	5342	Applie	ed For Applicable
Suite, Apt. #,	etc	Suite, Apt. #, etc.		5. Certificate of Stat	us Desired	\$8.75 Add	
22		27		6, Election Campaig		Fee Requ	
City & State		City & State		Trust Fund Contr		\$5.00 Ma Added to F	-
Zφ	Country	Zφ	Country		has liability for intangible	tax under si 199.	.032,
24	25	t Basistered Agent	[30]	Florida Statutes 10 Name and Add	Yes No	d Agent	
	9. Name and Address of Curren	t negistered Agent	B1 Nar				
L&IG/	ALLO ~		82 Str	oot Address (P.O. Box Number is	s Not Acceptable)		
1213 8.	ALLO W. 120TH WAY 1200 D L 33325 Davie, 3.	aroung cone	•				
DAVIE-F	1-33325 Davie 3	l 33325	83				
	,		84 Cit	γ	F	85 Zip Co	de
11 Pursuant to	the provisions of Sections 637,0502	and 607,1508, Florida Statu	tes, the above name	d corporation submits this state.			tered office
or registered	the provisions of Sections 607,0502 diagent, or both, in the State of Flori and accepts the obligations of Sect	da. Srich change was authoria inn 6)? 0505. Florida Statute	red by the corporations	on's bloard of directors! I hereby i	accept the appointment	as registered age	nt Tan
SIGNATURE	DILL Some	- LUS Calle	Kears	tered Usent	- 1/	26/96	
s	ignation bytes or printed where or registered agent	and strong arrays the	Olt Bigoteren Ag it signa	ADDITIONS/OHA	NGES TO OFFICERS A	ND DIRECTORS I	IN 12
12.	OFFICERS AN	DELETE	1 1 1 1 1 1 1 1 E	ADDITIONS OF			Addition
NAME	JAHANN, DARIA		1.2 NAME				
STREET ADDRESS	4220 N.W. 2ND AVE.		1 + \$1 to £1 ADDR	ess			
CITY - ST - ZIP	MIAMI FL 33127		1.4 (D.) (\$1 - Z IP			Change [Add-tion
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14. I do hereb	y certify that the information supplied	with this filing is voluntarry fu	mished and	of qualify for the exemption states	ra shall hare the same i	ecen esest as a me	640 16 5 V II 1U 10 50
certify that	the information indicated on this are Lam an officer or director of the corp Block 12 or Block 13 if changed, or	idal report or supplemental ar Joration or the receiver or trus	tee empow = 0 e	nd accurate and that my signature ecute this report as required by	Chapter 607, Florida St	tafutes; and that n	ny name

SIGNATURE:

1-17-96 576-9800

CR2E034 (12/95)