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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

02/26/07 (305) 650-5804

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000033170 (8)

TWO -N- ONE MACHINE SHOP INC.

Delevie of Dive	(D	Mailing Address			~		
Principal Plac		Mailing Address					
B725 N.W. 117 HIALEAH FL 3	TH ST., BAY 14 3016	8725 N.W. 117TH ST., B. HIALEAH FL 33016	AT 14				
					3. Date Incorporated or Qualified 04/27/1995	3a. Date of L 04/29/19	
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	Ţ	Applied For
21		26				Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country		Count	y	This corporation has liability for in		
24	25	29	30			Yes X No	1001 01 10010021
	g, Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	jistered Agent	
PER	DOMO, LUIS C		В	Name N	^		
	5 N.W. 117TH ST., BAY 14		B:		ress (P.O. Box Number is Not Acceptable	le)	
HIA	LEAH FL 33016						···
I			8:	3			
			8	1 City		85	Zip Code
				/			'
11. Pursuant	to the provisions of Sections 607.050;	2 and 607.1508, Florida Stati of Florida, Such change was	utes, the abo	ve-named corp ov the corpora	poration submits this statement for the pition's board of directors. I hereby accep	urpose of chang it the appointme	ging its registered ent as registered
agent. I a	in familiar with, and accept the obliga	ns of, Section 607.0505, F	loricla Statut	25.			an according to
SIGNATURE	Trees C. Vall					3/26/9	7
	Signature, typed or printed name of registered age			gent's gnature requ	ied when reinstaking) ADDITIONS/CHANGES TO OFFIC	DATE DIDE	OTODO IN 10
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	
NAME	PERDOMO, LUIS C	□ Mitte	1.2 NAME				ange E
STREET ADDRESS	8725 N.W. 117TH ST., BAY 14			T ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33016		1.4 CITY-	i			
TITLE	SD SD	DELETE	2.1 1011	01-111		CH	nange Addition
NAME	PERDOMO, LUIS		2.2 NAME				
STREET ADDRESS	8725 N.W. 117TH ST., BAY 14			T ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33016		2 4 CITY				
TITLE	TD	DELLIE	3 1 1IILE			☐ Ct	hange 🔲 Addition
NAME	PERDOMO, DANIEL		3.2 NAME				
STREET ADDRESS	8725 N.W. 117TH ST., BAY 14	r I	3.3 S1RC	T ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33016		3.4. CITY	-ST-ZIP			
JITLE		☐ DELETE .	4 1 1/ILF			Ct	nange 🔲 Addition
NAME			4. 2 NAM				
STREET ADDRESS			4 3 STRL	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY	S1-71P			
TITLE		Ditt ie	511HLF			☐ CH	hange 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STRE	.1 ADDRESS			
CITY-ST-ZIP			54 CITY-	S1-7IP			
TITLE		☐ DELETE	611111.6			LJ Cł	hange Addition
NAME			6.2 NAMI				
STREET ADDRESS				-1 ADDRESS			
CITY-ST-ZIP		1. 20. 4 71.	6.4 CI1Y		- C- C- 440 07/0V) The 25- C	. I disable a service	that the
informatio	nn indicated on this annual report or s	upplemental annual report is the receiver or trustee empo	true and aco wered to exe	curate and tha	d in Section 119.07(3)(i), Florida Statutes 1 my signature shall have the same legal rt as required by Chapter 607, Florida Si	l effect as il mai	de under oath; that