SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name P95000044331 (3)

PROFESSIONAL STAINLESS, INC.

**FILED** Sep 03 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				
1120 SW 76TH	CT	1120 SW 76TH CT	1120 SW 76TH CT			
MIAMI FL 3314	4	MIAMI FL 33144	MIAMI FL 33144			
					DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified	
					06/08/1995	
	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			65-0587097	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del>  </del>		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		City & State	··¬ ·		6. Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees
Zip	Country	— ·	Zip Country		8. This corporation owes or has paid the cu	
24	25	29	30	<del>.</del>	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent
MARTIN, JOHN				Name		
1120 SW 76TH CT			la la	82 Street Address (P.O. Box Number is Not Acceptable)		
MAIM						
			[1	33		
·			-	34 City		Jan Jan Code
			'	34 City	FI	85 Zip Code
11. Pursuant	to the provisions of sections 60	07.0502 and 607.1508, Florida Stat	utes, the above	ve-named corp		
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 Statutés.						
SIGNATURE Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
12. OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Ε Ι		Change Addition
NAME	ALAPTIAL IALIAI		1.2 NAM	ε		onlingo ruomon
STREET ADDRÉSS	4400 ON TOTAL OT		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAM EL 20144		1.4 CITY			1
TITLE		DELETE	2.1 TITL			Change Addition
NAME	C occent		2.2 NAM	İ		Change    Addition
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CiTY-ST-Zi			
TITLE			3.1 TITLE			
NAME		L DELETE	3.2 NAM			Change Addition
STREET ADDRESS				·		
				ET ADDRESS		
CITY-ST-ZIP TITLE		<u> </u>	3.4 CITY			
		L DELETE	4.1 TITUE			Change Addition
NAME			4.2 NAM	i		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TITLE		L DELETE	5.1 TITLE	1		Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	ST-ZIP		
TITLE		DELETE	6.1 TITLE	: [		Change Addition
NAME			6.2 NAMI	E		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZiP			6.4 CITY-	ST-ZIP		

14. 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 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 certify 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 changes or on applications with an address.