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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000066536 (0) TKS COMPUTER AIDED STEELMAKING, INC. Principal Place of Business Mailing Address RICCIANI RICHARD 5100 S CLEVELAND AVE #318-375 6971-4 PRESIDENTIAL CT FT MYER\$ FL 33919 FT MYERS FL 33919 3. Date Incorporated or Qualified 3a. Date of Last Report 08/28/1995 03/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3332893 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country 210 This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RICCIANI, RICHARD 6371-4 PRESIDENTIAL COURT 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33919 83 84 City 85 Zip Code 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 Statutes. Superfuse typed or princed name of registered agent and title if applicable (NOTE: Registered Agent signature regulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Title JUNKER, BERTRAM NAME 1.2 NAME BAHNHOFSR 12 STREET ADORESS 1.3 STREET ADDRESS D-77746 SCHUTTERWALD GERMANY CHY-ST-7/P 1.4 CITY - ST-ZIP DELETE 2 1 TITLE Change Addition THILE JUNKER, MARIETTA N: ELAF 2.2 NAME **BAHNHOFSR 12** STREET ADDRESS 2.3 STREET ADDRESS D-77746 SCHUTTERWALD GERMANY CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4, 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CHY-ST-7'P 5.4 DITY-ST-ZIP DELETE 6.1 TITLE Change Addition HILE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 14. If do 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 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 Block 12 or Block 13 if changed, of on an attachment with an address.

SIGNATURE:

FILED

Apr 23 1997 8:00am

Secretary of State

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