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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600009045 (1)

HALLANDALE ALUMINUM, CORP.

FILED Jan 15 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1037 NE 1 COURT 1037 NE 1 COURT HALLANDALE FL 33009 HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/26/1996 2. Principal Place of Business 2a. Mailing Address 4 EEI Number Applied For 26 65-0636229 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Country Ζiρ 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 PICHE, ROBERT 1037 NE 1 COURT 82 HALLANDALE FL 33009 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. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE D DELETE 1.1 TITLE Change PICHE. ROBERT NAME 1.2 NAME CR2E034 1037 NE 1 COURT STREET ADORESS 1.3 STREET ADDRESS HALLANDALE FL 33009 1<u>.4 CITY-ST-ZI</u>P CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME 3,3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3,4. CITY-ST-ZIP Change ☐ DELETE Addition TITLE 4,1 TITLE NAME 4, 2 NAME STREET ADDRESS 4,3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 DTLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 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, or on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY -ST-ZIP

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1-3.9