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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000019519 (3)

rincipal Place of Business	Mailing Address
1010. 6 AVENUE SOUTH	1010. 6 AVENUE SOUTH
LAKE WORTH FL 33460	LAKE WORTH FL 33460

FILED Feb 17 1998 8:00am Secretary of State

	BALL AUTOMOTIVE INC.				
Principal Place	e of Business	Mailing Address		* *************************************	(11918 PSTOT STORY 11818 EBIT 1891
1010. 6 AVENUE SOUTH 1010. 6 AVENUE SOUTH LAKE WORTH FL 33460 LAKE WORTH FL 33460			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
1				02/29/1996	
2. Principal Pi	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0646492	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. ₩, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Žiρ	Country	Zip	Country	8. This corporation owes or has paid the	
24	9. Name and Address of Curre	ent Booletered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
		on nogistered Agent	81 Name	10. Name and Address of New Neglister	en Agent
	LL, WILLIAM R				
	1010, 6 AVENUE SOUTH		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
LAH	KE WORTH FL 33460		83		
			84 City		B5 Zip Code
44 Bureupot t	to the province of Continue 607 Of	102 and 607 1609 Florido Stabit	as the about pamed so		
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was a	es, the above-hamed co authorized by the corpora	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
agent. Lar	m familiar with, and accept the obli	igations of, Section 607.0505, Flo	orida Statutes		-
SIGNATURE	Signature, typical or printed name of registered #	(NOT	E. Registered Agent signature req	uired when reinstating) DA	re
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	P	DELETE	1.1 TITLE	Abbillotto/off/Alfoco To Off Tochla	Change Addition
NAME	BALL, WILLIAM R		1.2 NAME		
STREET ADDRESS	5848 COURTNEY CIR		1.3 STREET ADDRESS		
CITY-ST-ZIP	BAYTON BEACH FL		1.4 CiTY - ST- ZiP		
TITLE	27,1,1011,027,101.172	DELETÉ	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETÉ	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST- ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

14. Thereby 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 attrichment with an address.

SIGNATURE:

wale 1 Bu

William R. Ball 2-10-88

386.0054