## 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 #

P96000023166 (7)

MACH 2 METALS, INC.

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



3301 N.W. F700	ce of Business 22ND TERR BEACH FL 33069	Mailing Address  3301 NW. 22ND TERR F700 POMPANO BEACH FL 33	MAG		DO NOT WRIT	E IN THIS SPACE	
US	DEMONTE BOOM	US		3. Date incorporated or Qualified 03/12/1996			
2. Principal i	2a. Mailing Address 26 12728 5	· L)		4, FEI Number 65-0649302	<u> </u>	Applied For Not Applicable	
27		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.75 Additional ee Required
City & State  23 CHEARWATER, R. 28		City & State 28 CLIEARWATIE	BCLIEARWATIER, FL		Election Campaign Financing     Trust Fund Contribution		.00 May Be ided to Fees
Zip 24 <b>337</b>			Country O US		This corporation owes or has p     Personal Property Tax due Jun	e 30. 🔼 Yes	ar Intangible
	g, Name and Address of Current I	10. Name and Address of New R	egistered Agent				
GARCIA, MARLENE AVILA & GARCIA				Name			
601 BRICKELL KEY DR., STE. E			82	Street Addres	ss (P.O. Box Number is Not Accepte	ble)	
	MIAMI FL 33131		83				
			84	City		FL  65	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.							
SIGNATURE Signature: typed or printed name of registered against and title if applicable. (NOTE: Registered Agains signature required when reinstating)  DATE							
12.				nt signature required	ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	CTORS IN 12
TITLE	P	DELETE	13. 1,1 TITLE	<u> </u>	ADDITIONS/CHANGES TO OFFI	CENS AND DIREC	
NAME	CYR, ANN		1.2 NAME				;
STREET ADDRESS			1.3 STREET	ADDRESS			ļ
CITY-ST-ZIP	TOLLAND CT	Delete	1.4 CITY-ST	r-ZIP			
TITLE	<del>-</del>		2.1 TITLE			Cha	ange L. Addition C
NAME STREET ADDRESS	VOSHALL, JAMES S 1194 SE FIRST TERRACE		2.2 NAME 2.3 STREET ADDRESS			<u> 2.</u>	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		2.3 STREET	ľ	•		
TITLE	T	DELETE	3.1 TITLE			☐ Cha	ange Addition
NAME	CYR, CLIFFORD		3.2 NAME			_	• –
STREET ADDRESS	AA AATTIONNI DO GOLTTII		3.3 STREET ADDRESS				
CITY-ST-ZIP	TOLLAND CT		3.4. CITY-S	T- ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Cha	ange Addition
NAME			4. 2 NAME				
STREET ADDRESS		4.3		ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST	- ZIP			:
TITLE		DELETE	5.1 TITLE			Cha	ange 🔲 Addition
NAME			5.2 NAME	i			
STREET ADDRESS		5.3		ADDRESS			
CITY-ST-ZIP	<u></u>		5.4 CITY-ST	- ZIP			
TITLE	DELETE 6.1		6.1 TITLE			☐ Cha	ange [ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for	6.4 CITY-ST		action 110 07/3)/i) Florido Statutos	further cortifi the	at the information

indicated on this annual report or supplied will this hing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio 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 jeceiver 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 a pattachnish with an address.