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



FILED Jun 11 1997 8:00am Secretary of State



ANN	PROFIT RPORATION UAL REPORT 1997		Sandra E Secreta DIVISION OF (RTMENT OF STATE B. Mortham By of State CORPORATIONS	Jun 11 19 Secretar	97 8:00	
DOCUMENT # P9600066951 (0) J.A.M. ALUMINUM, INC. Principal Place of Business Mailing Address 4912 GEORGIA AVENUE. BAY #1 WEST PALM BEACH FL 33405 Mailing Address WEST PALM BEACH FL 33405							
Suite, Apt. 22 City & Stai		26 Su	ailing Address vite, Apt. #, etc. ty & State		08/12/1996 4. FEI Number 65-0687843 5. Certificate of Status Desired 6. Election Campaign Financing	\$8.75 Additu Fee Require \$5.00 May	d For plicable ional ad
23 Zip	Country 25 9. Name and Address of Cu	28 Zij		Country	Trust Fund Contribution 8. This corporation has liability for inta Florida Statutes	ngible tax under s. 199 es No	
	to the provisions of Sections 607 registered agent, or both, in the Sem familiar with, and accept the of	.0502 and 607. State of Florida. bligations of, Se	1508, Florida Statut Such change was a section 607.0505, Flo	83 84 City es, the above-named or authorized by the corporated Statutes.	orporation submits this statement for the purp ration's board of directors. I hereby accept the	FL 85 Zip Code pose of changing its register appointment as register.	
SIGNATURE	Signature, lyped or printed name of registere	ed agent and title II ap	plicable. (NOT	E: Registered Agent signature rea		DATE	
12. TITLE NAME	PTD MARTINEZ, JORGE A	AND DIRECTO	DELETE	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICER		12 Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	4912 GEORGIA AVENUE, BJ WEST PALM BEACH FL 334 S MARTINEZ, SUZANNA T		DELETÉ	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	secretary Stokes Susana Ti		Addition
STREET ADDRESS	4912 GEORGIA AVENUE, B WEST PALM BEACH FL 334			2.3 STREET ADDRESS	stokes, Susana Ti 912 Georgia Ave. Ucsi Palm Beach, FL 3	3405	
CITY-ST-ZIP		···	☐ DELETE	3.1 1114.0	OCSITAIN DEADI, I'LL	Change	Additio
			DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	Desi Prim Dendi, I R. C.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	32 NAME 33 STREET ADDRESS 34. CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP	DESTRUM DENGLINE	Change	Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				32 NAME 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 43 STREET ADDRESS	DESTRUM DENGLIFIE	Change	Addition Addition Addition

I 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 clock) 13 if changed, or on an attachment with an address.