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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P96000079632 (1)

A.T. PRODUCTS, CORP.

## **FILED** Apr 14 1997 8:00am Secretary of State



Principal Place of Business Mailing Address				1 10011001 110 10110 01111 00111 <b>30</b> 111 <b>10</b> 111	Ediaf iedan ania njida ii	110 1101 10 <b>0</b> 1	
2451 N.W. 77T		2451 N.W. 77TH TERRA					
MIAMI FL 3314	<b>4</b> 7	MIAMI FL 33147					
					3. Date Incorporated or Qualified 09/19/1996	3a. Date of Last	Report
<b>∟</b> '	Place of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For
21		26	*		I I P P A A A A PARE E		Vot Applicable
Suite, Apt. #, etc.		Suile, Apt. #, etc.	27		5. Certificate of Status Desired	red \$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing \$5.00 May Be		D May Bo
Zip Country		28 Zin	= 4		Trust Fund Contribution Added to Fees		
24	Country   Zip     25     29		30		8. This corporation has liability for intangible tax under s. 199,032, Florida Statutes Yes No		
<u></u>		of Current Registered Agent			10. Name and Address of New Reg		
TAP	ANES, EDWIN		81	Name		, , , , , , , , , , , , , , , , , , , ,	·
	1 N.W. 77TH TERRA		82	Street Address (P.O. Box Number is Not Acceptable)			
	MI FL 33147				Address (1.0. Box Number is Not Acceptable)		
			83				
			84	City		FL 85 Zip	Code
11. Pursuant office or ragent. La	to the provisions of Sections registered agent, or both, in t im familiar with, and accept t	607,0502 and 607,1508, Fiorida Stat the State of Florida. Such change was the obligations of, Section 607,0505, F	ules, the abov authorized b lorida Statute	e-named corp y the corpora s.	poration submits this statement for the pulion's board of directors. I hereby accep		its registered s registered
SIGNATURE	Signature, typed or printed name of rep	Shured against and title if agustant to (All	OTE: Physicians Ac	ed a suelina en la	ired when re-natating)		
12.	<del></del>	ERS AND DIRECTORS	13.	an signature requi	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTO	RS IN 12
TITLE	PD	DELETE	11 Inle			☐ Change	
NAME	tapanes, edwin		1.2 NAME				Į.
STREET ADDRESS	749 EAST 52 STREET		1.3 \$18E61	ADDRESS			
CITY-ST-ZIP	HIALEAH FL 33013		1.4 CITY - S	31 - 7IP			
TITLE	SD	DELETE	2.1 TITLE			L. Change	Addition (
NAME	TAPANES, MARIETA		2.2 NAME				ŀ
STREET ADDRESS	749 EAST 52 STREET HIALEAH FL 33013		2.3 S18E11				
CITY-ST-ZIP TITLE	HIMLEMII PL 33013	DELETE	2. 4 CITY 3.1 TIT E	ST-ZH'		Change	Addition
NAME			3.2 NA &			onange	L.J Addition
STREET ADDRESS		•	3.3 \$11.3	ADDRESS			
CITY-ST-ZIP			3.4. CI	ST- <b>ZI</b> P			ŀ
TITLE		DELETE	4.1 117			☐ Change	Addition
NAME			4.2 No y				
STREET ADDRESS			4.3 \$1	ADDRESS			İ
CITY-ST-ZIP	<del></del>			T - ZIP			
TITLE		☐ DELETE	5.1 TC			Change	Addition
NAME			5.2 N				
STREET ADDRESS			5.3 \$	ADDRESS			
CITY-ST-ZIP TITLE	**************************************	DELFTE	5.4 C 6.1 T	·20°	The state of the s	Change	Addiso
NAME		F" britti	62 N			L_J Change	Addition
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			1 1	7-7IP			
	by certify that the information	supplied with this filing does not gua			Lin Section 119 07(3)(i) Florida Statutes	Liudhor cortify that	tho

Information Indicated on this annual report or supplemental annual report is true and a surate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or to lice 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 91 an attachmy with an address.

4/8/97

035-8434