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

Mailing Address

SUITE 215

9737 N.W. 41ST STREET

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

appears in Block 12 or Block

SIGNATURE

9737 N.W. 41ST STREET

SUITE 215



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000090162 (4)

ASSOCIATED COMPOSITE, INC.

MIAMI FL 3317	18	MIAMI FL 33178-292	MIAMI FL 33178-2924								
						3. Date Incorporated or C 11/01/1996	Jualified	3a. Da	ate of Last	Report	
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number 65 - 070516	_			Applied For	
21	***************************************	26	26				, B			Not Applicable	
Suite, Apt. 22	#, etc	Suite. Apt. #, et	Suite. Apt. #, etc. 27			6. Certificate of Status De	5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State	e	City & State	have '			, -	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Ζφ 24	Country 25		30	Country		8. This corporation has lie	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
		ss of Current Registered Agent	[30]	1		10, Name and Address o					
HER	ITZ, CHRISTY			81	Name			T			
ONE			82	82 Street Address (P.O. Box Number is Not Acceptable)							
	(ne boulevard			31.00	Sirver Advisor (1.10. Don Humber 18 Not Acceptable)						
MIAI	MI FL 33131			83							
				84	City			FL	85 Zi	p Code	
office or r	egistered agent, or both, m familiar with, and acce	ons 607 0502 and 607,1508, Florida in the State of Florida Such change apt the obligations of, Section 607,050 of teg stated agent and tits. Lappicable	was authoriz 05. Florida St	ed by tatutes	y the co s.	prporation's board of directors. I here	by accer	of the app	ointment	as registered	
12.		FICERS AND DIRECTORS	13		organica	ADDITIONS/CHANGES	TO OFFIC		DIRECTO	ORS IN 12	
TIILE	PTSD	DELET		TITLE		1,331113113,31114132			Change		
NAME	COLLINS, EDWARD		1.2	NAME					•	—	
STREET ADDRESS	9737 N.W. 41 STR	EET, #215	1.3	STREET	ADDRESS	;					
017Y-ST-7IP	MIAMI FL 33178		1.4	CITY+S	ST - 71P						
1/1LE		DELET		TITLE					Change	e Addition	
NAME			2.2	NAME							
STREET ADDRESS			2.3	STREET	ADDRESS	;					
DITY-ST-7.P	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			CITY-	ST-ZIP			<u> </u>			
TOTALE		[_] DELET	TE 3.1	TITLE					☐ Change	e 🔲 Addition	
NAME			3.2	NAME							
STREET ADDRESS			3.3	STREET	ADDRESS	:					
CITY-\$1-7:F*				CITY-S	ST-ZIP						
TILE		[] DELET	[E 4.1	TITLE					Change	e Addition	
NAME				NAME							
STREET ADDRESS			4.3	STREET	ADDRESS						
CITY-ST-7IP		Dete		CITY - S	T - ZIP				T AL		
TITLE NAME	L DELETE			5.1 TITLE 5.2 NAME					Change	e 🔲 Addition	
STREET ADORESS					ADDRESS			÷			
CHY-ST-ZIF TITLE		DELET		CITY-S	iI - ZIP	<u> </u>			Chara	e Addition	
NAME		L) Drie		TITLE					L Change	, L.J Addition	
STREET ADDRESS				NAME	ADDates						
					ADDRESS						
14. I do hereb	ov certily that the informa	tion appoined with this filling does not	6.4 Ovalify for th	CITY-S	mption	stated in Section 119 07/3/(i) Floring	a Statuto	s I fietbo	r certify th	at the	
informatio Lam an of	n indicated on this annu- fricer of director of the co	tion supplied with this filing does not all guort or supplemental acritical op- prioration or the receiver or unless e	is true and	accu	urate ar	id that my signature shall have the streport as required by Chapter 607,	ame lega Florida S	l effect as tatutes; a	s if made u	inder oath; that y name	

FILED Jan 22 1997 8:00am Secretary of State

