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**

FILED Mar 31 1998 8:00am Secretary of State

1	IMENT # P9600 STRIAL METALS OF THE SC				18/88 ANNA 8/ANA 8/48/8 ANN 1884
Principal Pla	ce of Business	Mailing Address			PARAO (118) BINI OLOGO (111 IDEL
790 SW 21ST TERRACE 980 N		980 N REDERAL HIGHWA BOCA RATUNEL 33432	Y #410	DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified 12/26/1996	
⊢ ⊸ '	Place of Business	2a. Mailing Address		4. FEI Number 52-2020 541	Applied For
Suite, Apt. #, etc.		26 PO Box 16 Suite, Apt. #, etc.	30247	-APPLIED FOR	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional
City & Ste	ate	City & State		6. Election Campalgn Financing	\$5.00 May Be
23		28 FT LANDER	one PL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29 33310~024	Zeo US	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
Į DI	CKENSON, DAVID B		61 Name		•1
98	980 N FEDERAL HIGHWAY #410		82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33432					
! *			83		
			84 City		85 Zip Code
				F	
office or agent. (registered agent, or both, in the State am familiar with, and accept the obligations.	oz and 607.1508, Florida Statute e of Florida. Such change was a gations of, Section 607.0505, Flo	es, the above-hamed co authorized by the corpor irida Statutes.	propration submits this statement for the purpose ration's board of directors. I hereby accept the a	pointment as registered
SIGNATURE	Signature, typed or prioted name of registered an	CONT and tale if anyl cobie	: Registered Agent signature rec	guired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	Director	DELETE	1.1 TITLE		ND DIRECTORS IN 12 Change Addition
NAME	GELPI, JOHN J JR	,	1.2 NAME		
STREET ADDRESS	401 N ROMAN STREET		1,3 STREET ADDRESS		
CITY-ST-ZIP	NEW ORLEANS LA	70112	1.4 CfTY - ST - ZiP		
TITLE	President	DELETE	2.1 TITLE		Change Addition
NAME	Michael O. Smi	th_	2.2 NAME)
STREET ADDRESS	190 5W 215T TE	errace	2.3 STREET ADDRESS		1
CITY-ST-ZIP	FT. LANDERDALE		2.4 CITY-ST-ZIP		
TITLE	Vice President	☐ DELETE	3.1 THTLE		Change Addition
NAME	Stanley Tepli 352 NW 1137H	\ † ~	3.2 NAME		,
STREET ADDRESS	352 NW 1137H	CL ZRADI	3.3 STREET ADDRESS		ļ
CITY-ST-ZIP	Coral Springs,	FL 33071	3.4. CiTY-ST-ZIP		Change Addition
TITLE	Secretary / Tren John J. Golpi) 401 N Roman	SUVER LI DELEIE	4.1 TITLE		Change Addition
NAME OTOCET ADODESO	TOND VI GOLDI)	Alla Stuant	4, 2 NAME		
STREET ADDRESS	TOI N ROMAN	A DALLE	4.3 STREET ADDRESS		İ
CITY-ST-ZIP TITLE	New Orleans, L	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	Marilya Hutter		5.2 NAME		
STREET ADDRESS	401 N Roman	street	5.3 STREET ADDRESS		l
CITY-ST-ZIP	New Orleans L		5.4 CITY-SI-ZIP		1
TITLE	1000 0 00000	DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		İ
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	a matification table a land amount in a complication	with this files siese not suplify to		in Section 119 07(3)(i) Florida Statutes I further	portify that the information

I 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 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 of 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 inchanged, or on an attachment with an address.