## 5. (8-98 37528 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 18 1998 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9700000558 (1)

OLD FLORIDA MANUFACTURING CO. Principal Place of Business Mailing Address 700 N.E. 90TH STREET 700 N.E. 90TH STREET MIAMI FL 33138 MIAMI FL 33138 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 01/03/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KOPPEN, R. DANIEL 700 N.E. 90TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33138** 83 84 City 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, typod or printed meno of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1111111 TITLE CONOVER, PAUL NAME 1.2 NAME 700 N.E. 90TH STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33138** CITY-\$1-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE KOPPENR, R. DANIEL NAME 2.2 NAME 700 N.E. 90TH STREET STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33138** CITY - ST - ZIP 2 4 CITY-S1-ZIP DELETE Change Addition TITLE 3.1 TITLE CARLTON, PHILIP III NAME 3.2 NAME 700 N.E. 90TH STREET STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33138** CITY-ST-ZIP 3 4. CITY - ST - 7IP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 truestice 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 an attachment with an address.

54 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE. AMMUKAN RAMILI KOPPEN MEETER 4-14-98 305-7545442

DELETE