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

**PROFIT CORPORATION** ANNUAL REPORT

100R



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 25 1998 8:00am Secretary of State

1. Corporate ULTRA	MENT # P9700 LUMINUM, INC.	0042288 (5	)	···		
5518 82ND AVENUE DRIVE EAST 5518 82ND AVENUE DRIV PALMETTO FL 34221 PALMETTO FL 34221			RIVE EAST			
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·		05/13/1997 4. FEI Number	Applied For
2. Principai i			,		45-0754550	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
27						Fee Required
	City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country				8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Personal Property Tax due June 30.	X Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent	24		10. Name and Address of New Registers	d Agent
	KER, GREG J		81	Name		
5518 82ND AVENUE DRIVE EAST				Street Add	dress (P.O. Box Number is Not Acceptable)	
PA	LIMETTO FL 34221		83			<del></del>
			84			**************************************
				City	· F	85 Zip Code
11. Pursuant office or agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered ag	gations of, Section 607.0505, I	-lorida Statutes.		rporation submits this statement for the purpose ation's board of directors. I hereby accept the a ulred when reinstaling)  DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D DELETE		1.1 TITLE	1	president	Change Addition
NAME	BAKER, GREG J		1.2 NAME			
STREET ADDRESS				DDRESS		
CITY-ST-ZIP TITLE	PALMETTO FL 34221	DELETE	1.4 CITY-ST- 2.1 TITLE	.,		Change Addition
NAME		:	2.2 NAME	t	DOUR A. CAHILL	
STREET ADDRESS	1	*	2.3 STREET A	DORESS 5	401 - 815 AUE. CIR. E.	
CITY-ST-ZIP	<u> </u>		2. 4 CITY-ST	-ZIP P	ALMETTO , FL 34221	
TITLE		☐ DELE <b>TE</b>	3.1 TITLE	S	TAMPA J. RAASIO	Change & Addition
NAME			3.2 NAME	2		
STREET ADDRESS	1.'		3.3 STREET A	DDRESS 5	1810 - 576 ST. E. #112 PRADENTON IFL 34208	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST 4.1 TITLE	-ZIP	KADEL TOTAL	Change Addition
NAME		<u>_</u>	4. 2 NAME			
STREET ADDRESS			4.3 STREET A	DDRESS		
CITY-ST-ZIP			4.4 CITY-ST	ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET A			
CITY-ST-ZIP		☐ DELET <b>E</b>	5.4 CITY-ST- 6.1 TITLE	- ZIP		Change Addition
TITLE			6.1 TITLE 6.2 NAME			E Change E Roution
NAME Street address			6.3 STREET A	DDBESS		
CITY-ST-ZIP			6.4 CITY-ST-			
	and the information numbing t	with this filing does not qualify			n Section 119 07/3\/i) Florida Statutas I further	certify that the information

Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 1 19.07(3/1), Florida Statutes. 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 eath; 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 Block 13 if changed for on an accurate that I am address.

(941) 723,9433