2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like

SIGNATURE:

FILED DOCUMENT # **P97000067978** Jun 07, 2000 8:00 am Secretary of State AEROSPACE SPECIFICATION METALS - U.K., INC. 06-07-2000 90430 034 ***158.75 Mailing Address Principal Place of Business 1384 W. MCNAB RD. 1384 W. MCNAB RD. FT. LAUDERDALE FL 33309-1120 FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0780353 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITI F TITLE Delete EDGE, BART NAME NAME STREET ADDRESS 1384 W. MCNAB ROAD STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33309 CITY-ST-78P ☐ Change ☐ Addition ☐ Delete TITLE TITLE HARVEY, BARRY NAME -1384 W. MCNAB ROAD-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33309 CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE KIRKSEY, MICHAEL' NAME STREET ADDRESS 1384 W. MCNAB RD. STREET ADDRESS FT. LAUDERDALE FL 33309 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE BRIDGES, DOUGLAS H NAME NAME STREET ADDRESS STREET ADDRESS 1384 W. MCNAB RD. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33309 ☐ Change Addition TITLE ☐ Delete BETTINI, TRICIA L NAME NAME STREET ADDRESS 1384 W. MCNAB RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33309 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if