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

PROFIT-CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

1. Corporation Name

May 04, 1999 8:00 am Secretary of State

05-04-1999 90086 014 ***150.00

DW Stainless - Alumir	num, Inc.			J
Principal Place of Business Mailing Address 16351 NW 45AVL.				
		DO NOT WRITE IN THIS	SPACE	
Miami, Fl. 33054		3 Date Incorporated or Qualifed		
•		3-2 6-9	8	
2. Principal Place of Business 21 5/10 NW ZNONE 26 28	· · · · · · ·	4. FEI Number - 0837191	_ 	ed For Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22		5. Certifcate of Status Desired	\$8.75 Add Fee Requ	
City & State City & State 28 City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F	
24 33127 25 Country S A 29 Zip 29	Country 30	This corporation owes the current year Int Personal Property Tax.]No
Name and Address of Current Registered Agent		10. Name and Address of New Registered	Agent	
Perez Behar: Associates,	Inc. 81 Name			
	82 Street Addr	ess (P.O. Box Number is Not Acceptable)	······	
14730 NE 10 AVI.	83	and a decident		-
M.Miami, Fl. 33161	84 City	FL	85 Zip Cod	de
office or registered agent, or both, in the State of Florida. Such change wa agent. I am familiar with, and accept the obligations of, Section 607.0505, SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (N			itment as regis	tered
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	IN 12
TITLE PD JESSICA DELRON WONG	1.1 TITLE		Change	Addition
16351 NW 45 Ave.	1.2 NAME			
STREET ADDRESS	1.3 STREET ADDRESS			
city-st-zip Miami, Fl. 33054	1.4 CITY-ST-ZIP			Fin a dulinia
TIME VD Andres. Wong			Change	Addition
STREET ADDRESS 16351 NW 45 AVI.	2.2 NAME 2.3 STREET ADDRESS			
CITY-ST-ZIP Miami, F1. 33054	2.4 CITY-ST-ZIP	-		
TITLE DELETE		·-	Change	Addition
NAME	3.2 NAME			1
STREET ADDRESS	3.3 STREET ADDRESS			
CITY-ST-ZIP	3.4. CITY-ST-ZIP			
TITLE DELETE			☐ Change	Addition
NAME	4. 2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS	4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE DELETE			☐ Change	Addition
NAME	52 NAME		•	
STREET ADDRESS	5.3 STREET ADDRESS			İ
CITY-ST-ZIP	5.4 CITY-ST-ZIP			
TIDE DELETE	6.1 TITLE		Change	☐ Addition ☐

CITY-ST-ZIP 14. 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 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 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, or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS