FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 27 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S09546 (0)G & H METALS, INC. Principal Place of Business Mailing Address 3675-C TAMPA RD 3675-C TAMPA RD OLDSMAR FL 34677 OLDSMAR FL 34677 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/19/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3035604 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 \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GERGOE, BRUNO Same 1121 IDLEWILD DRIVE Street Address (P.O. Box Number is Not Acceptable) **DUNEDIN FL 34698** 83 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. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ DELETE Change Addition 1.1 TITLE TITLE NAME GERGOE, BRUNO 1.2 NAME 1121 IDLEWILD OR 1.3 STREET ADDRESS STREET ADDRESS **DUNEDIN FL 34698** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ Change Addition DELETE 6.1 TITLE

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 16 11 Parkt

6.2 NAME

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

6.3 STREET ADDRESS

NAME STREET ADDRESS

CITY-ST-ZIP