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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # \$37722

(3)

|   | sman machining co   | · INC·   |                        |  |  |  |                            |                          |  |
|---|---|--|------------------------|--|--|--|----------------------------|--------------------------|--|
| incipal Place of  | Business  | Mailing Address                                      | s                      |  |  | I IMMIIDID IBA ISINI IMMII IMMII   | 1781 <b>-</b> 0 1161 01911 | E1811 A1811 A181         | ., ., ., ., ., ., .,                                   |
| 9090 NW S R<br>BAY 26   | IVER DR   | 6631 W 147<br>HIALEAH FI                             |                        |  |  |  |                            |                          |  |
| MEDLEY FL 3   | 3166  | U\$  |                        |  |  | 3. Date Incorporated or Qualified  | <b>3a.</b> Da              | te of Last Re            |  |
| US  |   |  |                        |  |  | 03/11/1991   |                            | 04/28/19                 |  |
| Principal Place   | of Business   | 2a. Mailing Add                                      | dress                  |  |  | 4. FEI Number  |                            | <b>└</b>                 | Applied For  |
| •   |   | 26   |                        |  |  | 65-0248156   |                            |                          | Not Applicab   |
| Suite, Apt. #,  | etc.  | Suite, Apt   | #, etc.                |  |  | <ol><li>Certificate of Status Desired</li></ol>  |                            |                          | Additional<br>Required                                 |
|   |   | 27   |                        |  |  | 6. Election Campaign Financing   |                            |                          | May Be   |
| City & State  |   | City & State   | 8                      |  |  | Trust Fund Contribution  |                            |                          | to Fees  |
|   | Country   | Zip  |                        | Country  |  | 8. This corporation has liability fo   | r intangible               | tax under s              | 199.032,   |
| Zip   | 25  | 29   |                        | 30   |  | Florida Statutes X Ye  | es 🔲 No                    |                          |  |
|   | g. Name and Address of Cu   |  |                        |  |  | 10. Name and Address of New  | Registere                  | d Agent                  |  |
|   | ·   |  | •                      | 81   | Name   |  |                            |                          |  |
| ARNOLD  | I FIVA  |  |                        | 82   | Street Add   | Iress (P.O. Box Number is Not Accepta  | able)                      |                          |  |
| 6631 W  | · ·   |  |                        |  |  |  |                            |                          |  |
|   | 1 FL 33012  |  |                        | 83   |  |  |                            |                          |  |
| , ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | ,   |  |                        | 84   | City   |  |                            | 85 Z)                    | o Code   |
|   |   |  |                        |  | <u> </u>   | oration submits this statement for the part of directors. Thereby accept the ac  | F                          |                          |  |
| ONIATUDE  | gnature typed or printed name of registered   | d agent and little if applicable                     |                        | E: Rug stered Ago  |  | oration submits this statement for the part of directors. Thereby accept the appearance when entirely.  ADDITIONS/CHANGES TO O   | DATE                       |                          |  |
| GNATURE   | goal ire: typed or printed name of registered<br>OFFICE RS  | agent and life if applicable                         | (NOTE                  | E: Rug stered Ago  | of signature reduce  | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       |                          | ORS IN 12  |
| GNATURESI   | gral in: typed or previou name of registrate OFFICERS   | agent and life if applicable                         |                        | E: Rug stered Ago  | nt signature requir  | red when renistating   | DATE                       | ND DIRECTO               | ORS IN 12  |
| GNATURE SI  | grafies based or prefed name of registrated OFFICERS PT ARNOLD, ELVA  | agent and life if applicable                         | (NOTE                  | 13.<br>1 1 TITLE<br>1 2 NAME   | nt signature requir  | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       | ND DIRECTO               | ORS IN 12  |
| SNATURE SI  | OFFICERS PT ARNOLD, ELVA 6631 W 14 AVE.   | agent and life if applicable                         | (NOTE                  | 13.<br>1 1 TITLE<br>1 2 NAME   | ni signature requir  | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       | ND DIRECTO               | DRS IN 12  |
| SNATURE SI  | grafies based or prefed name of registrated OFFICERS PT ARNOLD, ELVA  | d agent and the II applicable S AND DIRECTORS        | (NOTE                  | 13.<br>1 1 TITLE<br>1 2 NAME<br>1.3 STREE  | oni signature requir  I ADDRESS  ST-7IP  | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       | ND DIRECTO               | DRS IN 12  |
| ENATURE  SI  VE  REEL ANDRESS  Y-S1-ZIP  LE   | OFFICERS PT ARNOLD, ELVA 6631 W 14 AVE. HIALEAH FL V  | d agent and the II applicable S AND DIRECTORS        | (NOTE                  | 13. 1 1 TITLE 12 NAME 1.3 STREE  | of signature requirer to the signature requirement of the signature requir | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       | ND DIRECTO               | DRS IN 12  |
| GNATURE  SI  LE  VE  SEEI ANDRESS  Y-S'-ZIP  LE  ME   | OFFICERS  PT  ARNOLD, ELVA  6631 W 14 AVE.  HIALEAH FL  | diagram and the if agyleide A<br>S AND DIRECTORS ☐ D | (NOTE                  | 13. 1 1 TITLE 12 NAME 1.3 STREE 1.4 CHY- 2 1 TITLE 22 NAME   | of signature requirer to the signature requirement of the signature requir | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DATE                       | ND DIRECTO               | DRS IN 12  |
| GNATURE SI  | PT ARNOLD, ELVA 6631 W 14 AVE. HIALEAH FL V TURNER, CHARLES D   | S AND DIRECTORS  D  CLE CT.                          | PELETE                 | 13. 1 1 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2 1 TITLE 22 NAME 23 STREE 24 CITY-  | I ADDRESS  | ADDITIONS/CHANGES TO O   | DAY                        | ND DIRECTO Change Change | ORS IN 12 Additi                                       |
| GNATURE SI  F  VE  SEEL ADDRESS Y-SI-ZIP  LE  WE  SEEL ADDRESS Y-SI-ZIP   | PT ARNOLD, ELVA 6631 W 14 AVE. HIALEAH FL V TURNER, CHARLES D 10229 N.W. 82ND CIRC  | S AND DIRECTORS  D  CLE CT.                          | (NOTE                  | 13. 1 1 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE  | T ADDRESS ST-ZIP   | and when remetally applications of the Applitions of the Applitions of the Applitions of the Applitude of th | DAY                        | ND DIRECTO               | DRS IN 12<br>☐ Additi                                  |
| GNATURE SI  F  VE  REEL ANDRESS Y - ST - ZIP  LE  ME  REEL ADDRESS Y - ST - ZIP  LE  LE  LE  LE  LE  LE  LE  LE  LE  L  | PT ARNOLD, ELVA 6631 W 14 AVE. HIALEAH FL V TURNER, CHARLES D 10229 N.W. 82ND CIRC MIAMI FL 33015 SD ARNOLD, WILLIAM B.                   | S AND DIRECTORS  D  CLE CT.                          | PELETE                 | 13. 1 1 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2 1 TITLE 22 NAME 23 STREE 24 CITY- 3 1 TITLE 32 NAME  | T ADDRESS ST-ZIP   | ADDITIONS/CHANGES TO O   | DAY                        | ND DIRECTO Change Change | DRS IN 12<br>☐ Additi                                  |
| GNATURE  SI  LE  VE  REEL ANDRESS  Y - ST - ZIP  LE  ME  HEEL ADDRESS  Y - ST - ZIP  LE  ME   | PT ARNOLD, ELVA 6631 W 14 AVE. HIALEAH FL V TURNER, CHARLES D 10229 N.W. 82ND CIRC MIAMI FL 33015 SD ARNOLD, WILLIAM B. 6631 W. 14TH AVE. | S AND DIRECTORS  D  CLE CT.                          | PELETE                 | 13. 1 1 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2 1 TITLE 22 NAME 23 STREE 24 CITY- 3 1 TITLE 32 NAME 33 STREE   | I ADDRESS ST-ZIP FT ADDRESS  | ADDITIONS/CHANGES TO O   | DAY                        | ND DIRECTO Change Change | ORS IN 12 Additi                                       |
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SIGNATURE: SIGNATURE AND TYPED OR PRINT DE MANIE DE SIGNING OFFICER OR DIRECTOR

11/96 887-482