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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

S49424

(2)

AMERICAN STEEL RULE DIE INC.

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FILED

May 05 1998 8:00am

Secretary of State

Principal Place	e of Business	Maiting Address				T SEBRIDER OUT DIBING SOUTH DEBTH TIDIT BERF BIRET BIRET BIRET BIRET BIRET BIRET BIRET BIRET BIRET				
1861 W. 40 STREET 1661 W. 40 STREET										
HALEAH FL 33012		HIALEAH FL 33012				DO NOT WRITE IN THIS SPACE				
1						3. Date	Incorporated or Qualified		JI AOL	
						1	/29/1991			/
2. Principal P	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number			1	Applied For
21		26			6	5-0261966		1	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certi	icate of Status Desired			Additional	
22		27								Required
City & State		City & State				ion Campaign Financing			О Мау Ве	
Zip Country		Zip Country					Fund Contribution	<u> </u>		d to Fees
Zip	—	Zφ	30	ii iii y			corporation owes or has p anal Property Tax due Jui		_ ′	intangible No
24	25 Name and Address of Curren	29 t Registered Agent	[30]				e and Address of New F			
					Name	10.				
FABIAN, HECTOR 1661 W. 40 ST.					Ctunes & del	Address (P.O. Box Number is Not Acceptable)				
	ALEAH FL 33012			82	Street Add	ress (P.O. B	эх ічытірег із ічої Ассері	aule)		
	The William Control of the Control o			83						
				84	City			·	85 Zig	p Code
÷				**	City			FL	. 65 24	p Code
11, Pursuant	to the provisions of Sections 607.0503 registered agent, or both, in the State	2 and 607 1508, Florida Statu	ites, the al	pove	-named cor	poration sub	mits this statement for the	purpose of	changing	its registered
agent. I a	m familiar with, and accept the obliga	ntions of, Section 607.0505, F	lorida Stat	ules	ine corpora 3,	lion's board	or directors. Thereby acc	abi ina abb	Oll Hillouit E	is registered
SIGNATURE										
Signature, typed or printed name of registerios agent and title if applicable (NOTE Reg				d Age	nt signature toqu	red when reinstal		DATE	DIDECT	200 IN 40
TITLE	DEFICERS AND	DELETE	13. 1.1 Ti	FI F		AUUII	IONS/CHANGES TO OFF	ICERS AND	Change	
NAME	FABIAN, HECTOR	L. Otter	1.2 N/						Ontrigo	,
STREET ADDRESS	6707 KINESMOOR WAY		•		ADDRESS					
CITY-ST-ZIP	MIAMI LAKES FL 33014		1.4 0							
TITLE		DELETE	2 1 Ti						Change	Addition
NAME			22 N	4ME						
STREET ADDRESS			2351	23 STREET ADDRESS						
CITY-ST-ZIP			2.40	ITY-S	ST-ZIP					
TITLE		DELETE	311	TLE					Change	Addition
NAME			3.2 N/	AME						
STREET ADDRESS			3351	REET	ADDRESS					
CITY-ST-ZIP					ST - ZIP	· · · · · · · · · · · · · · · · · ·			-	
FITLE		DELETE	4.1]]						L_ Change	Addition
NAME			4.2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		DELETE	4.4 C		T-ZIP	····	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition
TITLE		L) VELETE	5.1 1)						L) Viidilyt	S [_] MUUIIOII
NAME			5.2 N/		ADDRESS					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		☐ DELETE	5.4 Cl 6.1 Ti		1 - 219				Change	Addition
NAME :		_ Section	62 N							
STREET ADDRESS		A			ADDRESS					
STUCEL MOUNTESS		(1	0.5 5	MEET	unnutrag					

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 supplimental 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 of the receiver of 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 first an address.