

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

**FILED**

**May 09 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000046956 (4)**  
 1. Corporation Name  
**ENGINEERED METALS AND COMPOSITES, INC.**



Principal Place of Business <b>339 6TH AVE W BRADENTON FL 34205</b>	Mailing Address <b>339 6TH AVE W BRADENTON FL 34205-6620</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>05/15/1996</b>	3a. Date of Last Report
21. Suite, Apt. #, etc.	26. <b>PO Box 10367</b>	4. FEI Number <b>65-0667260</b>	Applied For Not Applicable
22. City & State	27. <b>BRADENTON FL</b>	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23. Zip	28. <b>34282</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24. Country	29. <b>MAVATEE</b>	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**LANIER, MARGARET O  
 339 6TH AVE W  
 BRADENTON FL 34205**

10. Name and Address of New Registered Agent  
 81. Name **FORBES, SHERRY**  
 82. Street Address (P.O. Box Number is Not Acceptable)  
**3930 75th St. W #1619**  
 83.   
 84. City **BRADENTON** FL 85. Zip Code **34209**

11. Pursuant to the provisions of Sections 607.0302 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.

SIGNATURE: *Sherry Forbes* **SHERRY FORBES** DATE: **4/27/97**  
Signature typed in printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>LANIER, MARGARET O</b>	
STREET ADDRESS	<b>3930 75TH ST W #1619</b>	
CITY - ST - ZIP	<b>BRADENTON FL 34209</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PRISIDENT</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>FORBES, SHERRY</b>	
1.3 STREET ADDRESS	<b>3930 75th St W #1619</b>	
1.4 CITY - ST - ZIP	<b>BRADENTON FL 34209</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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.

SIGNATURE: *Sherry Forbes* **SHERRY FORBES** DATE: **4/27** 941 795-5913  
Signature and typed or printed name of signing officer or director Daytime Phone #

CR2E034 (9/96)