

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
 Aug 27 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 853557 (7)

1. Corporation Name
HARRIS STRUCTURAL STEEL CO., INC.



Principal Place of Business 1640 NEW MARKET AVE. SO. PLAINFIELD NJ 07080	Mailing Address 1640 NEW MARKET AVE. SO. PLAINFIELD NJ 07080
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1982	3a. Date of Last Report 10/25/1996
21		26	2 Lakeview Ave	4. FEI Number 13-5573394	Applied For Not Applicable
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	City & State	28	City & State Piscataway NJ	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Zip	29	Zip 08854	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
HARRIS, THOMAS JR. 11370 12TH OAK WAY UNIT 512 NORTH PALM BEACH FL 33408				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCALLUM, RICHARD	1.2 NAME	
STREET ADDRESS	GUINEA HOLLOW RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	LEBANON NJ	1.4 CITY-ST-ZIP	
TITLE	PCD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, THOMAS, JR	2.2 NAME	Harris Thomas Jr
STREET ADDRESS	113 UPLAND WAY	2.3 STREET ADDRESS	2 Lakeview Ave
CITY-ST-ZIP	HADDONFIELD NJ	2.4 CITY-ST-ZIP	Piscataway, NJ 08854
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, GARDNER	3.2 NAME	
STREET ADDRESS	11791 LOARA ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	GARDEN GROVE CA	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRAUSS, MARVIN	4.2 NAME	
STREET ADDRESS	6 MOUNTAIN LN	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLMDEL NJ	4.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, MURIEL	5.2 NAME	
STREET ADDRESS	301 PLAINFIELD RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	EDISON NJ	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 _____ DATE **8/16/97** 752-6070x101

CR2E034 (4/97)