

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003562

1. Entity Name

FRY'S METALS INC.

FILED

00 JAN 31 PM 2: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business % COOKSON AMERICA 1 COOKSON PL PROVIDENCE RI 02903	Mailing Address % COOKSON AMERICA 1 COOKSON PL PROVIDENCE RI 02903-3248
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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4. FEI Number 06-1008504	Applied For <input type="checkbox"/> Not Applied For
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC SHARPE, RAYMOND P % COOKSON AMERICA, 1 COOKSON PL PROVIDENCE RI 02903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS PROVIDENCIA ORTIZ ONE COOKSON PLACE PROVIDENCE, RI 02903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ZERFOSS, DAVID B % ALPHA METALS, 600 ROUTE 440 JERSEY CITY NJ 07304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200003128922-14 -02/09/00--01015--027 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUREC, HARRY % FRY METALS, 4100 SIXTH AVENUE ALTOONA PA 16602	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V O'SULLIVAN, WARREN % ALPHA FRY GROUP, TANDEM HOUSE MARLOWE WAY, CROYDON, U.K.	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GLEIM, RICHARD R 600 ROUTE 440 JERSEY CITY NJ 07304	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DINGLEY, MARK A % COOKSON AMERICA, 1 COOKSON PL PROVIDENCE RI 02903	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK A. DINGLEY **MARK A. DINGLEY, SECRETARY** 1/24/2000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 (401) 521-1000