

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H03457

FILED
Feb 14, 2005
Secretary of State

Entity Name: SPECIALTY METALS, INC.

Current Principal Place of Business:

% CHARLES A. COPLEY
6433 EDGEWATER DR
ORLANDO, FL 328101203

New Principal Place of Business:

6433 EDGEWATER DR
ORLANDO, FL 32810 US

Current Mailing Address:

% CHARLES A. COPLEY
6433 EDGEWATER DR
ORLANDO, FL 328101203

New Mailing Address:

6433 EDGEWATER DR
ORLANDO, FL 32810 US

FEI Number: 59-2443440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALLIDAY, DOUGLAS G
6433 EDGEWATER DR
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

HALLIDAY, CHRISTOPHER M PRES.
6433 EDGEWATER DR
ORLANDO, FL 32810 US

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: CHRISTOPHER M. HALLIDAY

02/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALLIDAY, CHRISTOPHER M
Address: 161 KENTUCKY BLUE CIR
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: AHLBERG, DONALD L
Address: 190 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TS () Delete
Name: HALLIDAY, CHRISTOPHER M
Address: 161 KENTUCKY BLUE CIR
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HALLIDAY, CHRISTOPHER M
Address: 6151 LINNEAL BEACH DR.
City-St-Zip: APOPKA, FL 32703 US

Title: VP (X) Change () Addition
Name: AHLBERG, DONALD L
Address: 190 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: TS (X) Change () Addition
Name: HALLIDAY, CHRISTOPHER M
Address: 6151 LINNEAL BEACH DR.
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER M. HALLIDAY

PRES

02/14/2005

Electronic Signature of Signing Officer or Director

Date