


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 06, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # H15357**  
 1. Entity Name  
**SUN STATE ALUMINUM, INC.**



Principal Place of Business      Mailing Address  
**6154 FORT KING RD.**      **6154 FORT KING RD.**  
**ZEPHYRHILLS, FL 33542**      **ZEPHYRHILLS, FL 33542**

**DO NOT WRITE IN THIS SPACE**



02042008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**59-2411427**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

5. Name and Address of Current Registered Agent  
**CORREIA, KEITH**  
**14429 SKYLINE DR.**  
**DADE CITY, FL 33525**

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees


10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CORREIA, KEITH
STREET ADDRESS	14429 SKYLINE DR.
CITY-ST-ZIP	DADE CITY, FL
TITLE	DVP
NAME	CORREIA, MICHAEL P
STREET ADDRESS	37608 SKYRIDGE DR
CITY-ST-ZIP	DADE CITY, FL 33525
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 03/21/08-80003-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

**SIGNATURE:**  **M. PAUL CORREIA VP/TREAS**      **813-788-7308**  
 \_\_\_\_\_      Date      Daytime Phone #