

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000001711	
1. Entity Name BLUESCOPE STEEL AMERICAS LLC	

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 24 AM 10:03

Principal Place of Business 2801 PONCE DE LEON BLVD STE 1180 CORAL GABLES, FL 33134	Mailing Address 111 WEST OCEAN BLVD., STE. 1370 LONG BEACH, CA 90802
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

02072006 Chg-LLC CR2E083 (11/05)	
4. FEI Number 81-0556914	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	

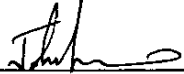
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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

Filing Fee is \$50.00 Due by May 1, 2006	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BMP STEEL TECHNOLOGY INC 1209 ORANGE ST. WILMINGTON, DE 19801 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULZ, DIEKER 111 W. OCEAN BLVD, SUITE 1370 LONG BEACH, CA 90802 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400066590784 ☐ Change ☐ Addition 02/27/06--01001--002 **213.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS MARSHALL, JACK 111 W. OCEAN BLVD, SUITE 1370 LONG BEACH, CA 90802 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELL, STUART OLD PORT RD. N. SOUTH WALES, AUSTRALIA, 2505 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.	
SIGNATURE:  JACK MARSHALL	2/8/06 (562) 628-0125
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	