

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000007804 (6)**

1. Corporation Name
SPECIAL STEEL INC.



Principal Place of Business: **50 WEST MASHTA DRIVE STE. 1 KEY BISCAVNE FL 33149**
Mailing Address: **50 WEST MASHTA DRIVE STE. 1 KEY BISCAVNE FL 33149**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: **02/01/1993**
3a. Date of Last Report: **06/12/1995**
4. FEI Number: **65-0384941**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**CHAINANI, SURESH
50 WEST MASHTA DRIVE
STE. 1
KEY BISCAVNE FL 33149**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (F.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature typed or printed and signed for Block 12 only. (Block 12 only) (Block 12 only)

(A/E)

12. OFFICERS AND DIRECTORS
1. TITLE: **D**
NAME: **CHAINANI, SHEILA**
STREET ADDRESS: **50 WEST MASHTA DR., STE. 1**
CITY, ST., ZIP: **KEY BISCAVNE FL 33149**
2. TITLE: DELETE
3. TITLE: DELETE
4. TITLE: DELETE
5. TITLE: DELETE
6. TITLE: DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE: Change Addition
2. NAME
3. STREET ADDRESS
4. CITY, ST., ZIP
5. TITLE: Change Addition
6. NAME
7. STREET ADDRESS
8. CITY, ST., ZIP
9. TITLE: Change Addition
10. NAME
11. STREET ADDRESS
12. CITY, ST., ZIP
13. TITLE: Change Addition
14. NAME
15. STREET ADDRESS
16. CITY, ST., ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(g), 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: *Suresh Chainani*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
Suresh Chainani

3/4/96 305-361-0740
Date Registered/Phone #

CR2E034 (12/95)