2004 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 02, 2004 8:00 am Secretary of State DOCUMENT # S85957 04-02-2004 90060 026 ***150.00 1. Entity Name ALLSTEEL & GYPSUM PRODUCTS, INC. 24033075 Principal Place of Business Mailing Address 1250 NW 23RD AVE 1250 NW 23RD AVE FORT LAUDERDALE, FL 33311 HS FORT LAUDERDALE, FL 33311 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03022004 Chg-P CR2E034 (10/03) City & State City & State Applied For 4. FEI Number 65-0289889 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HALE ESQ. CHRISTOPHER D VALDINI, PALMER& HALE PA 5353 N FEDERAL HWY STE 303 FORT LAUDERDALE, FL 33308 vite 303 Zip 203 3 08 8. The above named entity submits this statement for the purp ose 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 of printern ime of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE Change ■ Addition NAME MARKUS, GLENN NAME STREET ADDRESS 1250 NW 23RD AVE STREET ADDRESS FORT LAUDERDALE, FL 33311 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME MARKUS, ALANA NAME 1250 NW 23RD AVE STREET ADDRESS STREET ADDRESS FORT LAUDERDALE, FL 33311 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify 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 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 leport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

changed, or on an attac

SIGNATURE:

ith an addres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED