FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 10 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400004637 (4)

SOUTHERN CORROSION INC.

Principal Plac	ng Address				- I TERNIND IIIN NGUIL DIGUL BENIT BENIT BENIT BENIT BENIT BENIT BINA BENIT BENIT BENIT (BENIT BENIT B					
RT 1 BOX 118 B ROANOKE RAPIDS NC 27870			RT 1 BOX 118 B ROANOKE RAPIDS NC 27870-9702							
							3. Date Incorporated or Qualified		to of Last R	eport
Dringling Place of Produces			I As Market And Assessment			09/08/1994	08/0	1/1996		
2. Principal Place of Business			2a. Mailing Address			4. FEI Number			plied For	
Suite, Apt. #, etc.		26 S	Suite, Apt. #, etc.			56-1357158		\$8.75	t Applicable	
22		27	27				5. Certificate of Status Desired		Fee Re	
City & State		$\vdash \neg$	City & State			Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added		
Zip	Country	Z	ip	Cour	itry		8. This corporation has liability for in			
24	4 25		30] No	, , , , , , , , , , , , , , , , , , , ,	
	9. Name and Address of Curre	nt Register	ed Agent				10. Name and Address of New Reg	istered A	gent	
CT	CORPORATION SYSTEM				B1	Name				
1200 S. PINE ISLAND RD. PLANTATION FL 33324			82 Street Ac			Street Addre	ess (P.O. Box Number is Not Acceptable	e)		
FEMILION FE 33324					В3					
				1	84	City			85 Zip	Code
44 Durguant	to the provinions of Sections 607.00	00 and 607	1500 Elorido Statut	lon the oh		named sore	aration submits this statement for the m	FL.	shanalaa ii	
office or	registered agent, or both, in the State	of Florida	Such change was	authorized	by	the corporati	oration submits this statement for the pu on's board of directors. I hereby accep	irpose oi i the appo	ointment as	registered
_	am familiar with, and accept the oblig	jations of, S	ection 607.0505, FI	orida Statu	iles.	•				
SIGNATURE	Signature, typed or printed name of registered ag	ont and title if a	ppl-cable (NOT	E. Registered	Agen	nt signature require	od when reinstating)	DATE		
12.	OFFICERS AN	ID DIRECTO		13.			ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTOR	S IN 12
TITLE	P		DELETE	1.1 1)(1)	E				Change	Addition
NAME	SKILTON, JAMES A			1.2 NAM	ΛE	}				
STREET ADDRESS	RT 1 BOX 118 B			1.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	ROANOKE RAPIDS NC 27870		DELETE	1.4 C/1		- ZIP				
TITLE	j v				2.1 111LE			ا	∐ Change	Addition
NAME	BROOKS, GEORGE J RT 1 BOX 118 B				2.2 NAME 2.3 STRLET ADDRESS					
STREET ADDRESS	ROANOKE RAPIDS NC 27870									
CITY-ST-ZIP TITLE	S				2 4 City-St-ZiP 3 1 TitlF				Change	Addition
NAME	SKILTON, HARRY A		1	3 2 NAME						
STREET ADDRESS	177 US ROUTE 130			33 STR	EE1 A	ADDRESS				
ÇITY-ST-ZIP	PEDRICKTOWN NJ 08067			3 4. CIT	Y-\$1	I - ZIP				
TITLE	T	☐ DELETE		4.1 THE	4.1 TITLE				☐ Change	Addition
NAME	Web ster, Kent L			4. 2 NA	ME					
STREET ADDRESS	177 US ROUTE 130			4.3 STR	EFT #	ADDRESS				
CITY-ST-ZIP	PEDRICKTOWN NJ 08067			4.4 CIT		· ZIP				
TITLE	D DAGOUG PERT		☐ DELETE	5.1 1ITLE				f	Change	Addition
NAME	BASOLIS, BERT			5.2 NAN						
STREET ADDRESS	2431 BLACKWOOD DR.					ADDRESS				
CITY-ST-ZIP TITLE				5.4 CITY - ST - ZIP 6.1 TITLE				Change	Addition	
NAME			Detrie	6 2 NA						Monitor
PERME				0 2 NAM	11k 15 1 1 1	10,000,000				

14. I do hereby 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 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 atjachment with an address.

6.4 CITY - ST - 7IP

. / Losser 31 November 121 Townto 1/12/07 Q19-535-177