

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000519

**Entity Name:** ENNIS STEEL INDUSTRIES, INC.

**Current Principal Place of Business:**

1801 S INTERSTATE 45  
ENNIS, TX 75119

**Current Mailing Address:**

PO BOX 1360  
ENNIS, TX 75120

**FEI Number: 75-2874122**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CAPITOL CORPORATE SERVICES, INC.  
515 EAST PARK AVENUE  
2ND FL  
TALLAHASSEE, FL 32301 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name ANDERSON, W BRYCE  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title CEO  
Name ANDERSON, JOHN  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title PRESIDENT  
Name MALTZ, EVAN  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title VP  
Name BENTLEY, CHADD  
Address PO BOX 1360  
City-State-Zip: ENNIS TX 75120

Title SECRETARY  
Name ZICARELLI, AMY  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title VP  
Name CASTILLO, CARLOS  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title VP  
Name MALTZ, IAN  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

Title VP  
Name ZIANCE, JASON  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: SAMANTHA HENRY**

**ASSISTANT SECRETARY 03/14/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name HENRY, SAMANTHA  
Address 1801 S INTERSTATE 45  
City-State-Zip: ENNIS TX 75119