

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005714

Entity Name: QUANEX IG SYSTEMS, INC.**Current Principal Place of Business:**800 COCHRAN AVE
CAMBRIDGE, OH 43725-9317**Current Mailing Address:**800 COCHRAN AVE
CAMBRIDGE, OH 43725-9317**FEI Number:** 31-1411562**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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	P
Name	WILSON, GEORGE B
Address	800 COCHRAN AVE
City-State-Zip:	CAMBRIDGE OH 43725

Title	VP
Name	GRIFFITHS, WILLIAM C
Address	1800 WEST LOOP SOUTH SUITE 1500
City-State-Zip:	HOUSTON TX 77027

Title	STD
Name	DELANEY, KEVIN P
Address	1800 WEST LOOP SOUTH SUITE 1500
City-State-Zip:	HOUSTON TX 77027

Title	D
Name	KORB, BRENT L
Address	1800 WEST LOOP SOUTH SUITE 1500
City-State-Zip:	HOUSTON TX 77027

Title	ASST. SECRETARY
Name	ROYCE, THOMAS R
Address	1800 WEST LOOP SOUTH SUITE 1500
City-State-Zip:	HOUSTON TX 77027

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: THOMAS R ROYCE

ASST SEC

04/07/2014

Electronic Signature of Signing Officer/Director Detail_____
Date