2004 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 23, 2004 08:00 AM **DOCUMENT # 270937 Secretary of State** SEVENTEENTH STREET IRON AND METAL CO. Principal Place of Business Mailing Address 530 17TH STREET 530 17TH STREET WEST PALM BEACH, FL 33407 US WEST PALM BEACH, FL 33407 No Cha-P CR2E034 (10/03) 02042004 **DO NOT WRITE IN THIS SPACE** Applied For 4. FEI Number 59-1009179 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MITCHELL, RONALD L DO NOT WRITE 530 17TH STREET WEST PALM BEACH, FL 33407 IN THIS SPACE 5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signisture, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MITCHELL, RONALD L NAME STREET ADDRESS 530 17TH STREET UNDUUU61204 CITY-ST-ZP WEST PALM BEACH, FL D2723704-80078-020 150.00 BILE STREET ADORESS CIT-ST-ZP 淋漓 STREET ADDRESS DO NOT WRITE CITY-51-7/P BME IN THIS SPACE MANE STREET ADDRESS CITY-ST-ZP MLE NAME STREET ADDRESS CTY-ST-ZP MLE MASIE STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3%), 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 curporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other tike empowered.

SIGNATURE: Romald 2 Truthell

SIGNATURE AND TYPED OR PRINTED NAME OF MIGNING OFFICER OR DIRECTOR

2-19-04

561-659-3400

Dete

Daytime Phone #

FILED