

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 670409

FILED
Apr 02, 2004
Secretary of State

Entity Name: RINKER MATERIALS STEEL FRAMING, INC.

Current Principal Place of Business:

1501 BELVEDERE RD.
ATTN: M.A. HOFFMAN
WEST PALM BEACH, FL 334061502 US

New Principal Place of Business:

1501 BELVEDERE RD.
ATTN: SHAMINDRA BALKARAN/PBR TEAM
WEST PALM BEACH, FL 334061502 US

Current Mailing Address:

1501 BELVEDERE RD.
ATTN: M.A. HOFFMAN
WEST PALM BEACH, FL 334061502 US

New Mailing Address:

FEI Number: 59-1999923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINLEY G. W.
1501 BELVEDERE RD
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: CLARKE, DAVID V
Address: 1501 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: STD () Delete
Name: MCCREA, DEANA R
Address: 1501 BELVEDERE RD
City-St-Zip: W PALM BCH, FL 33406

Title: AS () Delete
Name: CAPASSO, ROBERT J
Address: 1501 BELVEDERE RD
City-St-Zip: WEST PALM BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CLARKE, DAVID V
Address: 1501 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DEANA MCCREA

STD

04/02/2004

Electronic Signature of Signing Officer or Director

_____ Date