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**Apr 02 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 809107 (6)
1. Corporation Name
LTV STEEL COMPANY, INC.



Principal Place of Business: 25 W PROSPECT, 1641-GH, ATTN: TAX DEPT, CLEVELAND OH 44115, US
Mailing Address: 25 W PROSPECT, 1641-GH ATTN: TAX DEPT, CLEVELAND OH 44115-1000, US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21 200 PUBLIC SQUARE	26 200 PUBLIC SQUARE	10/31/1952	03/20/1996
22 TAX DEPT, SUITE 39209	27 TAX DEPT, SUITE 39209	4. FEI Number	Applied For
23 CLEVELAND, OHIO	28 CLEVELAND, OHIO	34-0486510	Not Applicable
24 44114-2308	29 44114-2308	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 USA	30 USA	<input type="checkbox"/>	\$5.00 May Be Added to Fees
		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when transferring) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOAG, D.H. (CEO)	1.2 NAME	
STREET ADDRESS	25 W. PROSPECT	1.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	1.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGE, A. W.	2.2 NAME	
STREET ADDRESS	25 W. PROSPECT	2.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	2.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308
TITLE	VPC	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENNING, G.T.	3.2 NAME	
STREET ADDRESS	25 W PROSPECT	3.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	3.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308
TITLE	P	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY, J.P.	4.2 NAME	
STREET ADDRESS	25 W. PROSPECT	4.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	4.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARROLL, D.L.	5.2 NAME	SKUREK, J.C.
STREET ADDRESS	25 W. PROSPECT	5.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	5.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TREMAIN, A.C.	6.2 NAME	MORANG, J.
STREET ADDRESS	25 W. PROSPECT	6.3 STREET ADDRESS	200 PUBLIC SQUARE
CITY-ST-ZIP	CLEVELAND OH	6.4 CITY-ST-ZIP	CLEVELAND, OHIO 44114-2308

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 attachment with an address.

SIGNATURE: *Will Kelly* *W.L. KELLY* ASSISTANT CONTROLLER *(216) 622-5053*

CR2E034 (9/96)