

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90441 040 ***150.00

DOCUMENT # 829731

1. Entity Name
SYRO STEEL COMPANY



Principal Place of Business
**2525 STEMMONS FRWY
DALLAS, TX 75207 US**

Mailing Address
**P. O. BOX 35721
DALLAS, TX 75235-0721 US**

J4003261



04212004 No Chg-P CR2E034 (10/03)

4. FEI Number
34-0668935

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SYAK, HARRY A.
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX
TITLE	VD
NAME	IVY, JIM S
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX
TITLE	T
NAME	SHOOP, NEIL O.
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX
TITLE	VSD
NAME	FORTADO, MICHAEL G
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX
TITLE	AT
NAME	HARVOT, RON A
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX
TITLE	D
NAME	WALLACE, TIMOTHY R
STREET ADDRESS	2525 STEMMONS FRWY
CITY - ST - ZIP	DALLAS, TX

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ron A. Harvot
Asst Treasurer

4/22/04 **(214) 589-8291**
Date Daytime Phone #