

# **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F00000000018

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** KANTHAL CORPORATION

**Current Principal Place of Business:**

1 COMMERCE BOULEVARD  
PALM COAST, FL 32164

**New Principal Place of Business:**

**Current Mailing Address:**

1 COMMERCE BOULEVARD  
PALM COAST, FL 32164

**New Mailing Address:**

**FEI Number:** 06-1057960

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

**Title:** COB  
**Name:** GUSTAVSSON, JONAS  
**Address:** PO BOX 502  
**City-St-Zip:** HALLSTAHAMMAR, SE SE-734 27 SE

**Title:** D  
**Name:** FROSINI, PETER  
**Address:** 982 GRIFFIN POND ROAD  
**City-St-Zip:** CLARKS SUMMIT, PA 18411 US

**Title:** S  
**Name:** EDWARD, FAUSTINO  
**Address:** 119 WOOSTER STREET  
**City-St-Zip:** BETHEL, CT 06801 US

**Title:** D  
**Name:** MASKAL, ANNETTE  
**Address:** 1702 NEVINS ROAD  
**City-St-Zip:** FAIRLAWN, NJ 07410

**Title:** O  
**Name:** YU, PHIL  
**Address:** 1 COMMERCE BOULEVARD  
**City-St-Zip:** PALM COAST, FL 32164

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:** ANNETTE MASKAL

D

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date