


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2004 8:00 am
Secretary of State

06-07-2004 90007 002 ***150.00

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| DOCUMENT # F01000002826 |  |
| 1. Entity Name SSM INDUSTRIES, INC. | |

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| Principal Place of Business 1825 LIVERPOOL STREET PITTSBURGH, PA 15233 | Mailing Address 1825 LIVERPOOL STREET PITTSBURGH, PA 15233 |
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14023502

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|---|---|
| 2. Principal Place of Business 3401 GRAND AVE Suite, Apt. #, etc. | 3. Mailing Address 3401 GRAND AVE Suite, Apt. #, etc. |
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04012004 Chg-P CR2E034 (10/03)

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|--------------------------------|--------------------------------|
| City & State PITTSBURGH, PA | City & State PITTSBURGH, PA |
| Zip 15225 | Country |
| Zip 15225 | Country |

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| 4. FEI Number 25-1606897 | Applied For Not Applicable |
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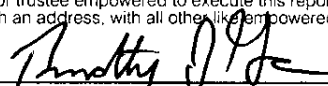
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 | |
| 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |

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| 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 _____ | DATE _____ |

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD SEIDEN, ROBERT 1825 LIVERPOOL STREET PITTSBURGH, PA 15233 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 3401 GRAND AVE PITTSBURGH, PA 15225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V SZYNICRAK, THOMAS A 1825 LIVERPOOL STREET PITTSBURGH, PA 15233 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SZYMCAK, THOMAS A 3401 GRAND AVE PITTSBURGH, PA 15225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST GORMAN, LAWRENCE 1825 LIVERPOOL STREET PITTSBURGH, PA 15233 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 3401 GRAND AVE PITTSBURGH, PA 15225 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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| 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:  | 4-27-04 412 771-3400 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date Daytime Phone # |