

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90294 043 ***150.00

DOCUMENT # F01000002826

1. Entity Name
SSM INDUSTRIES, INC.



Principal Place of Business
3401 GRAND AVENUE
PITTSBURGH, PA 15225 US

Mailing Address
3401 GRAND AVENUE
PITTSBURGH, PA 15225 US

00043306



03292006 No Chg-P CR2E034 (11/05)

4. FEI Number
25-1606897

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SEIDEN, ROBERT
STREET ADDRESS 3401 GRAND AVE
CITY-ST-ZIP PITTSBURGH, PA 15225

TITLE V
NAME SZYMCAK, THOMAS A
STREET ADDRESS 3401 GRAND AVE
CITY-ST-ZIP PITTSBURGH, PA 15225

TITLE ST
NAME GORMAN, LAWRENCE
STREET ADDRESS 3401 GRAND AVENUE
CITY-ST-ZIP PITTSBURGH, PA 15225

TITLE AST
NAME GORMAN, TIMOTHY J
STREET ADDRESS 3401 GRAND AVE
CITY-ST-ZIP PITTSBURGH, PA 15225

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

3-29-06 (412) 777-5100

Date

Daytime Phone #