

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90184 034 ***150.00

DOCUMENT # F03000002062 1. Entity Name ISG VENTURE INC.			
Principal Place of Business 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 44286-9000		Mailing Address 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 44286-9000	
2. Principal Place of Business 3210 Watling St. Suite, Apt. #, etc.		3. Mailing Address 3210 Watling St. Suite, Apt. #, etc.	
City & State East Chicago, IN		City & State East Chicago, IN	
Zip 46312	Country USA	Zip 46312	Country USA
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP MOTT, RODNEY 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 442869000 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Louis Schorsch 3210 Watling St. East Chicago, IN 46312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSCF LEONARD, ANTHONY 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 442869000 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President William Brake 3210 Watling St. East Chicago, IN 46312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO SPELICH, GORDON 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 442869000 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President + Controller John Brett 3210 Watling St. East Chicago, IN 46312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HERNANDEZ, CARLOS 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 442869000 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President + Secretary CARLOS HERNANDEZ 3210 Watling St. East Chicago, IN 46312 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCOO GOODWIN, JOHN 3250 INTERSTATE DR., 2ND FLOOR RICHFIELD, OH 442869000 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Kenneth M. Jakubowicz 3210 Watling St. East Chicago, IN 46312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT ARNETT, LONNIE 3250 INTERSTATE DR, 2ND FLR RICHFIELD, OH 44286 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, Finance + CAO Vaidya Sethuraman 3210 Watling St. East Chicago, IN 46312 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: <u>Vaidya Sethuraman</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>4/28/06</u> <small>Date Daytime Phone #</small>	