

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004268

FILED
Jan 22, 2007
Secretary of State

Entity Name: AKER KVAERNER METALS, INC.

Current Principal Place of Business:

3600 BRIAR PARK DR
HOUSTON, TX 77042

New Principal Place of Business:

2550 NORTH DRAGOON STREET
SUITE 150
TUCSON, AZ 85745

Current Mailing Address:

3600 BRIAR PARK DR
HOUSTON, TX 77042

New Mailing Address:

FEI Number: 76-0739363 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAWSON, DAVID
Address: AV. NUEVA TAJAMAR 4841
City-St-Zip: LOS CONDES SANTIAGO CHILE,

Title: D () Delete
Name: BOYD, COX
Address: 2801 E 13TH ST
City-St-Zip: DEER PARK, TX 77536

Title: D () Delete
Name: MANDEL, GARY
Address: 7909 PARKWOOD CIR DR
City-St-Zip: HOUSTON, TX 77036

Title: S () Delete
Name: FIORE, ANTHONY T
Address: 3600 BRIAR PARK DR
City-St-Zip: HOUSTON, TX 77042

Title: T () Delete
Name: MCCLOSKEY, MICHAEL
Address: 3600 BRIAR PARK DR
City-St-Zip: HOUSTON, TX 77042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MANDEL, GARY
Address: 3600 BRIARPARK DRIVE
City-St-Zip: HOUSTON, TX 77042

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANTHONY T. FIORE

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01/22/2007

Electronic Signature of Signing Officer or Director

_____ Date