


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 26, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F05000006933</b> 1. Entity Name STEEL DYNAMICS SALES NORTH AMERICA, INC.	
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Principal Place of Business 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804	Mailing Address 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
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01302007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>32-0046029</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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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 <u>Robert Lane, Assistant Secretary</u> <u>01/30/2007</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>000000650143</b> <b>03/07/07-80080-004 150.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUSSE, KEITH E 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLETT, MARK D 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS TEETS, RICHARD P JR 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSCF HEASLEY, GARY E 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NOLAN, JOHN W 6714 POINTE INVERNESS WAY, SUITE 200 FORT WAYNE, IN 46804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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>Gary E Heasley</u> <u>02/20/2007</u> <u>260-459-3553</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
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