## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007136

Entity Name: KLOCKNER KHS, INC.

City-St-Zip:

WAUKESHA, WI 53186

**FILED** Aug 21, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 880 BAHCALL COURT WAUKESHA, WI 53186 **Current Mailing Address: New Mailing Address:** 880 BAHCALL COURT WAUKESHA, WI 53186 FEI Number: 39-1145674 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition ARRANT, MARK Name: Name: 880 BAHCALL COURT Address: Address: City-St-Zip: WAUKESHA, WI 53186 City-St-Zip: Title: STD Title: () Change () Addition () Delete ELLIOTT, JAMES Name: Name: 880 BAHCALL COURT Address: Address: WAUKESHA, WI 53186 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition FLACH, ROLAND FLACH, ROLAND Name: Name: 880 BAHCALL COURT 880 BAHCALL COURT Address: Address: City-St-Zip: WAUKESHA, WI 53186 City-St-Zip: WAUKESHA, WI 53186 Title: VC ( ) Delete Title: (X) Change ( ) Addition REISGEN, VALENTIN REISGEN, VALENTIN Name: Name: Address: 880 BAHCALL COURT Address: 880 BAHCALL COURT

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.

City-St-Zip:

WAUKESHA, WI 53186

SIGNATURE: JAMES E. ELLIOTT PD 08/21/2006