

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F65466

(7)

1. Corporation Name

STAINLESS STEEL MANUFACTURING CO.

Principal Place of Business

Mailing Address

ONE STAINLESS PLAZA  
DEERFIELD BEACH FL 33441-1798

ONE STAINLESS PLAZA  
DEERFIELD BEACH FL 33441-4747

FILED  
97 JUL -3 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KASSAB, ROBERT L  
ONE STAINLESS PLAZA  
DEERFIELD BEACH FL 33441-1798

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME KASSAB, ROBERT L.  
STREET ADDRESS ONE STAINLESS PLAZA  
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE EVP ☐ DELETE

NAME KASSAB, GREGORY E.  
STREET ADDRESS ONE STAINLESS PLZ  
CITY-ST-ZIP DEERFIELD BCH FL

TITLE VP ☐ DELETE

NAME KASSAB, THOMAS M.  
STREET ADDRESS ONE STAINLESS PLAZA  
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ST ☐ DELETE

NAME KASSAB-RENO, CAROL L.  
STREET ADDRESS ONE STAINLESS PLAZA  
CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

100002234351--0  
-07/09/97--01115--002  
\*\*\*1100.00 \*\*\*550.00

8-97

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (9/96)