## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000003102

Entity Name: STEEL SPECIALTY CO.

City-St-Zip:

FRANKLIN, MI 48025

FILED Apr 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2670 S.CRAWELL 32259 SCENIC LANE FRANKLIN, MI 48025 FRANKLIN, MI 48025 **Current Mailing Address: New Mailing Address:** P.O.BOX 250642 FRANKLIN, MI 480250642 FEI Number: 38-1405415 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR., STE. 4 WESTON, FL 33331 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition FRUMAN, DOROTHY Name: Name: 4350 HILLCREST, APT 111 Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: PD Title: () Delete () Change () Addition Name: FRUMAN, LEE Name: 24670 SOUTH CROMWELL Address: Address: FRANKLIN, MI 48025 City-St-Zip: City-St-Zip: Title: Title: STD ( ) Delete () Change () Addition FRUMAN, DALE Name: Name: 3002 HILLCREST DRIVE Address: Address: City-St-Zip: EXPORT, PA 15632 City-St-Zip: Title: ASAT () Delete Title: () Change () Addition KAYE, MARCY F Name: Name: Address: 32259 SCENIC LANE Address:

I hereby certify that the information supplied with this filing does not qualify 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:

SIGNATURE: MARCY FRUMAN KAYE ASAT 04/21/2009