


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

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Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90082 031 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000004659

1. Corporation Name
KRUPP HOESCH STEEL PRODUCTS, INC.



Principal Place of Business 180 INTERSTATE NORTH PKWY STE 500 ATLANTA GA 30339 US	Mailing Address 180 INTERSTATE NORTH PKWY STE 500 ATLANATA GA 30339 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 09/08/1994	4. FEI Number 58-1594889	Applied For <input type="checkbox"/> Not Applicable
21	26			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
22	27	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00-May Be Added to Fees	
City & State	City & State ATLANTA	23	28	
Zip Country	Zip Country	24	29	30
				8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAMP, HANS J	1.2 NAME	
STREET ADDRESS	180 INTERSTATE NORTH PKWY	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRINKMANN, ULRICH	2.2 NAME	
STREET ADDRESS	180 INTERSTATE NORTH PKWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KUBISIAK, BERND	3.2 NAME	
STREET ADDRESS	180 INTERSTATE NORTH PKWY	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	QUINT, REINHARD	4.2 NAME	
STREET ADDRESS	180 INTERSTATE NORTH PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change
NAME	CRESSATY, CHERIF	5.2 NAME	YP HARRY VETTER
STREET ADDRESS	180 INTERSTATE NORTH PKWY	5.3 STREET ADDRESS	180 INTERSTATE NORTH PKWY
CITY-ST-ZIP	ATLANTA GA	5.4 CITY-ST-ZIP	ATLANTA, GA
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	
NAME	SCHNEIDER, DIRK	6.2 NAME	
STREET ADDRESS	180 INTERSTATE NORTH PKWY	6.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as that of an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bernd Kubisiak **BERND KUBISIAK**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)