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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9600000448 (8)

HORSEHEAD INDUSTRIES, INC.

## FILED May 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 110 E 59TH ST 110 E 59TH ST **NEW YORK NY 10022** NEW YORK NY 10022 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/26/1996 2. Principal Place of Business 2a. Mailing Address Applied For 22-2370906 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State Cily & Stale \$5.00 May Be 6. Election Campaign Financing  $\Box$ 23 28 Trust Fund Contribution Added to Fees Country Zip Country This corporation owes or has paid the current year Injungible Personal Property Tax due June 30. Yes No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zip Code FL 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed parce of repellered agent and title if applicable (NCTE: Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 117111 TITLE FLAHERTY, WILLIAM E 1.2 NAME NAME 110 E 59TH ST STREET ADORESS 1.3 STREET ADDRESS **NEW YORK NY 10022** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ... Change \_ Addition 2.1 TITLE TITLE FLAHERTY, WILLIAM E NAME 2.2 NAME 110 E 59TH ST 2.3 STREET ADDRESS STREET ADORESS **NEW YORK NY 10022** 2 4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3 1 11TLE QUIRK, WILLIAM M McGee, Raymond L. 3.2 NAME NAME 110 E 59TH ST 300 Frankfort Road STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY** Monaca, PA 15061 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETÉ Change Addition TITLE 4.1 TITLE **NELSON, PETER W** NAME 4.2 NAME 110 E 59TH ST STREET ADDRESS 4.3 STREET AUDRESS NEW YORK NY 10022 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TO LE STATILE, RONALD J 5.2 NAME NAME 110 E 59TH ST 300 Frankfort Road STREET ADDRESS 5.3 STREET ADDRESS **MEW YORK NY 10022** Monaca, PA 15061 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE MARSHALL, ROBERT P NAME 6.2 NAME 110 E 59TH ST STREET ADDRESS 63 STREET ADDRESS **NEW YORK NY 10022** 

6.4.C/f.Y-ST-ZIP NEW YORK NY 10022

14. Thereby certify that the information supplied with this filting 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 supplied ental annual report is two 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 of the receiver or trustee or provered 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 of a attachment with an aptidross.

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ulaz la (212)627-2