

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 11, 2004 08:00 AM**  
**Secretary of State**

|                          |                                                                                   |
|--------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # G23017</b> |  |
|--------------------------|-----------------------------------------------------------------------------------|

1. Entity Name  
**PRO STEEL, INC.**

Principal Place of Business  
**457 RIVER RD., LOT 11  
OAKHILL, FL 32759 US**

Mailing Address  
**P.O. BOX 1490  
EDGEWATER, FL 32132 US**

**DO NOT WRITE IN THIS SPACE**



07072004 No Chg-P CR2E004 (10/03)

|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>59-2253038</b> | Applied For<br><input type="checkbox"/> Not Applicable |
|------------------------------------|--------------------------------------------------------|

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JACKSON, DOUGLAS L  
457 RIVER RD., LOT 11  
OAKHILL, FL 32759**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and fee if applicable

NOTE: Registered Agent signature required when restoring

**000000169836  
08/11/04-80001-005 150.00**  
DATE

**FILE NOW!!! PER IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

|                                        |                                   |
|----------------------------------------|-----------------------------------|
| TITLE<br><b>PVTS</b>                   | NAME<br><b>JACKSON, DOUGLAS L</b> |
| STREET ADDRESS<br><b>2200 POPE AVE</b> |                                   |
| CITY-ST-ZIP<br><b>S DAYTONA, FL</b>    |                                   |
| TITLE<br><b>NAME</b>                   |                                   |
| STREET ADDRESS<br><b>CITY-ST-ZIP</b>   |                                   |
| TITLE<br><b>NAME</b>                   |                                   |
| STREET ADDRESS<br><b>CITY-ST-ZIP</b>   |                                   |
| TITLE<br><b>NAME</b>                   |                                   |
| STREET ADDRESS<br><b>CITY-ST-ZIP</b>   |                                   |
| TITLE<br><b>NAME</b>                   |                                   |
| STREET ADDRESS<br><b>CITY-ST-ZIP</b>   |                                   |

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i) Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 of this report, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Douglas L. Jackson*  
**DOUGLAS L. JACKSON**

**7-15-04 386 345-1652**  
Date Daytime Phone #