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Feb 25, 1999 8:00 am
Secretary of State

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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 # J39104

1. Corporation Name
SOUTHERN STEEL DRUMS, INC.

Principal Place of Business
P.O. BOX 278
ZELLWOOD FL 32798-0278

Mailing Address
P.O. BOX 278
ZELLWOOD FL 32798-0278

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

10/23/1986

4. FEI Number

59-2854834

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MURPHY, J.M.
6191 JONES AVE.
ZELLWOOD FL 32798

10. Name and Address of New Registered Agent

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

TITLE **DP** ☐ DELETE

NAME **MURPHY, J M**
STREET ADDRESS **6191 JONES AVE**
CITY-ST-ZIP **ZELLWOOD FL**

TITLE **VP** ☒ DELETE

NAME **GIDDENS, GERALDINE**
STREET ADDRESS **6191 JONES AVE**
CITY-ST-ZIP **ZELLWOOD FL**

TITLE **STD** ☒ DELETE

NAME **MURPHY, H. A.**
STREET ADDRESS **6191 JONES AVE**
CITY-ST-ZIP **ZELLWOOD FL**

TITLE **V** ☒ DELETE

NAME **BUTLER, GERALD P JR**
STREET ADDRESS **6191 JONES AVENUE**
CITY-ST-ZIP **ZELLWOOD DL 32798**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **President** ☒ Change ☐ Addition

1.2 NAME **J. M. Murphy**
1.3 STREET ADDRESS **6191 Jones Avenue**
1.4 CITY-ST-ZIP **Zellwood, FL 32798**

2.1 TITLE **Secretary** ☐ Change ☒ Addition

2.2 NAME **Gayle Hansen-Dalicandro**
2.3 STREET ADDRESS **2300 West 13th Street**
2.4 CITY-ST-ZIP **Chicago, -IL-60608--**

3.1 TITLE **Treasurer** ☐ Change ☒ Addition

3.2 NAME **Tony Serge**
3.3 STREET ADDRESS **1540 S. Greenwood Avenue**
3.4 CITY-ST-ZIP **Montebello, CA 90640**

4.1 TITLE **Director & Vice President** ☐ Change ☒ Addition

4.2 NAME **Elliot Pearlman**
4.3 STREET ADDRESS **2300 West 13th Street**
4.4 CITY-ST-ZIP **Chicago, IL 60608**

5.1 TITLE **Director** ☐ Change ☒ Addition

5.2 NAME **Calvin Lee**
5.3 STREET ADDRESS **1540 S. Greenwood Avenue**
5.4 CITY-ST-ZIP **Montebello, CA 90640**

6.1 TITLE **VP** ☐ Change ☒ Addition

6.2 NAME **Barry Slavin**
6.3 STREET ADDRESS **2300 West 13th Street**
6.4 CITY-ST-ZIP **Chicago, IL 60608**

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. 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, with all other like empowered.

SIGNATURE:

Signature Required
MURPHY, J M **2/4/99**

Date

Daytime Phone #

CR2E034 (11/98)