2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2005 08:00 AM Secretary of State

DOCUMENT # J88585 1. Entity Name STEEL SYSTEMS OF PENSACOLA, INC.			Secretary of State	
Principal Place of Business 8788 PAUL STARR DRIVE P.O. BOX 9579 PENSACOLA, FL 32513 Mailing Address 8788 PAUL STARR DRIVE P.O. BOX 9579 PENSACOLA, FL 32513				
DO NOT WRITE IN THIS SPA			CE	03152005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 59-2907291 Not Applicable
	And the second s			5. Certificate of Status Desired
6. Name and Address of Current Registered Agent				
BELL III, RANDALL R. 4135 BAISDEN DR. PENSACOLA, FL 32503			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 (registered agent. SIGNATURE 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 (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (registered agent, or both, in the State of Florida. I am familiar with a state of Florida. I am familiar with a state of Florida. I am familiar with a				
10.	OFFICERS AND DIF	RECTORS	<u> </u>	
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12. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



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