2003 FOR PROFIT CORPORATION

FILED Jan 23, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** J95928 DOCUMENT # 1. Entity Name 01-23-2003 90170 027 ***150.00 LEWIS METALS, INC. Principal Place of Business Mailing Address % WAYNE LEWIS % WAYNE LEWIS 2311 INDUSTRIAL DRIVE 2311 INDUSTRIAL DRIVE PANAMA CITY FL 32405 PANAMA CITY FL 32405 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For City & State City & State 59-2849725 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEWIS. WAYNE Street Address (P.O. Box Number is Not Acceptable) 2311 INDUSTRIAL DRIVE PANAMA CITY FL 32405 Zip Code City 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 title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change Addition ☐ Delete TITLE TITLE LEWIS, WAYNE NAME NAME 2311 INDUSTRIAL DRIVE STREET ADDRESS STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Channe ☐ Addition TITLE TITLE

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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or tri changed, or on an attachment with an

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SIGNATURE:

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TITLE

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□ Delete

Addition

Change