## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Jan 24, 2005 08:00 AM DOCUMENT # L03000021061 **Secretary of State** 1. Entity Name STEEL DRUM INDUSTRIES, LLC Principal Place of Business Mailing Address PO BOX 271349 4812 W MLK TAMPA, FL 33614 US \_\_ TAMPA, FL 33688 01192005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 13-4254120 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FULTZ, WALTER R DO NOT WRITE 4208 GOLF POINTE CT TAMPA, FL 33624 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 title if applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE FULTZ, WALTER NAME STREET ADDRESS 4208 GOLF PT CT TAMPA, FL 33618 CITY-ST-ZIP H00000194164 TITLE 01/25/05-80090-010 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. If hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OF AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1-20-55

Daytime Phone #

FILED