2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L04000004397

1. Entity Name

NORTH AMERICAN METAL CO., LLC



Principal Place of Business

Mailing Address

9471 BAYMEADOWS RD, STE 106 JACKSONVILLE, FL 32256

9471 BAYMEADOWS RD, STE 106 JACKSONVILLE, FL 32256

FILED Apr 02, 2007 08:00 AM Secretary of State



01182007 No Chg-LLC

CR2E083 (11/05)

Dayline Phone #

FEI Number	Applied For
20-0610536	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

CHASE, RAYMOND F 9471 BAYMEADOWS RD, STE 106 JACKSONVILLE, FL 32256

SIGNATURE:

DO NOT WRITE IN THIS SPACE

		<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·
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	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating) .	DATE
Fi De	ling Fee Is \$50.00 ue by May 1, 2007		U00000687498 04/10/07-80042-018 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KOHN, KEVIN R 9471 BAYMEADOWS RD, STE 106 JACKSONVILLE. FL 32256		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			
STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY ST-ZIP			:
TITLE NAME STREET ADDRESS CITY-SI-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.			