

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90153 004 ****50.00

DOCUMENT # M03000001126

1. Entity Name
SKYLINE STEEL, LLC



Principal Place of Business
**8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054**

Mailing Address
**8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03202007 Chg-LLC CR2E083 (12/06)

4. FEI Number
22-2198913

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRP
LARGOZA, N
8 WOODHOLLOW ROAD
PARSIPPANY, NJ 07054 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
GRODHAUS, T.
8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
JARRETT, G.
8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
KELLY, R.
8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
LIEB, R.
8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
WITTEN, R.
8 WOODHOLLOW ROAD
PARSIPPANY, NY 07054 ☐ Delete

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
PLANK, W
8 WOODHOLLOW ROAD
PARSIPPANY, NJ 07054 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MADISON, T.
8 WOODHOLLOW ROAD
PARSIPPANY, NJ 07054 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
MC SHANE, G.
8 WOODHOLLOW ROAD
PARSIPPANY, NJ 07054 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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.

SIGNATURE:

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

NILDA B. LARGOZA 4/4/2007

Date

973-795-4433

Daytime Phone #