## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000002502

Entity Name: GH METAL WERKS, LLC

FILED Jan 09, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

30725 AURORA ROAD 31100 SOLON ROAD SOLON, OH 44139 SUITE 11

SOLON, OH 44139

ADDITIONS/CHANGES:

**Current Mailing Address: New Mailing Address:** 

31100 SOLON ROAD 30725 AURORA ROAD SOLON, OH 44139 SUITE 11 SOLON, OH 44139

FEI Number: 27-0048967 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331

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.

SIGNATURE:

Date

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: (X) Change ( ) Addition MGR () Delete

LASALVIA, ROBERT F LASALVIA, ROBERT F Name: Name: 30725 AURORA ROAD Address: 31100 SOLON ROAD Address: City-St-Zip: SOLON, OH 44139 City-St-Zip: SOLON, OH 44139

Title: PRES () Delete Title: **PRES** (X) Change ( ) Addition KASSIGKEIT, HENRY C Name: KASSIGKEIT, HENRY C Name:

Address: 920 GARDENIA DRIVE Address: 31100 SOLON ROAD, SUITE 11 City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: SOLON, OH 44139

Title: SEC (X) Delete Title: () Change () Addition

SETLOCK, PATRICIA Name: Name: 920 GARDENIA DRIVE Address: Address:

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip:

Title: VΡ (X) Delete Title: () Change () Addition

Name: BIELERT, GEORGE J Name: Address: 635 W LAKESIDE #504 Address: City-St-Zip: CLEVELAND, OH 44113 City-St-Zip:

TREA Title: (X) Delete Title: () Change () Addition

LASALVIA, ROBERT F Name: Name: 5790 BAY BERRY Address: Address: NORTH RIDGEVILLE, OH 44039 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT F LASALVIA 01/09/2008