2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M16544

1. Entity Name

CORAL STEEL COMPANY



Principal Place of Business

759 BENOIST FARMS RD WEST PALM BEACH, FL 33411 US Mailing Address

759 BENOIST FARMS RD WEST PALM BEACH, FL 33411

US

FILED Apr 06, 2006 8:00 am Secretary of State

04-06-2006 90025 019 ***158.75

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03302006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2612542

Applied For Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KRAMER, SCOTT ESQ 6650 INDIANTOWN RD SUITE 200 JUPITER, FL 33458

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8. The above the obligat	named entity submits this statement for the $\boldsymbol{\rho}$ ions of registered agent.	urpose of changing its reg	istered office or re	egistered agent, or both	n, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE					
	osginature, typed or printed name or registered agent and tibe in	appicable. (NOTE: He	gistered Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS		<u>}</u>	
TITLE	DPS				
NAME	DISBURY, LEE M				
STREET ADDRESS	428 SANTA ANNA DR.				
CITY-ST-ZIP	PALM SPRINGS, FL 33641				
TITLE	CVT	,-			
NAME	DISBURY, SHERRILL W				
STREET ADDRESS	428 SANTA ANNA DRIVE		i i		
CITY-ST-ZIP	PALM SPRINGS, FL 33461				
TITLE	-		÷		-
NAME					
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Street address					
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12. 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 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Levil W. Disbury 3

Daytime Phone # 823