2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

ID TYPED OR PRINTED NAME OF SK

Secretary of State DOCUMENT # P02000088757 08-19-2004 90055 009 ***550.00 SOUTHEAST STEEL TRADING, INC. Principal Place of Business Mailing Address 24080332 **421 MARITIME COURT 421 MARITIME COURT** DESTIN, FL 32541 DESTIN, FL 32541 2. Principal Place of Business 4522 GOLF VILLA COURT 3. Mailing Address 4522 GOLF VILLA COURT Suite, Apt. #, etc. Suite, Apt. #, etc. 06222004 CR2E034 (10/03) Cha-P 203 NIT UNIT 203 City & State City & State 4. FFI Number Applied For DESTIN. DESTIN 43-1914173 Not Applicable Country Country \$8.75 Additional 72541 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WHITEHEAD, R. SCOTT ESQ. Street Address (P.O. Box Number is Not Acceptable) WEIMORTS & WHITEHEAD, P.A. 4507 FURLING LANE, SUITE 209 **DESTIN. FL 32541** City 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition MURPHY, JAMES V NAME NAME 4522 GOLF VILLA COURT UNIT 203 **421 MARITIME COURT** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DESTIN, FL 32541 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY_ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Defete TITLE Ti Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I 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 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.

FILED

✓ 7./2.0 ¥
Date Daytime F

Aug 19, 2004 8:00 am