

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000038817

FILED
May 14, 2009
Secretary of State**Entity Name:** J. LINDSEY STEEL, INC.**Current Principal Place of Business:**4791 NE 5TH AVENUE
FT. LAUDERDALE, FL 33334**New Principal Place of Business:**695 NE 42 STREET
OAKLAND PARK, FL 33334**Current Mailing Address:**4791 NE 5TH AVENUE
FT. LAUDERDALE, FL 33334**New Mailing Address:****FEI Number:** 20-2489522 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LINDSEY, ELIZABETH A
4791 NE 5TH AVENUE
FT. LAUDERDALE, FL 33334 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: LINDSEY, JAMES P
Address: 4791 NE 5TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334**Title:** T (X) Delete
Name: LINDSEY, ELIZABETH A
Address: 4791 NE 5TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: LINDSEY, ELIZABETH A
Address: 4791 NE 5TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334**Title:** () Change () Addition
Name:
Address:
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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH ANNE LINDSEY

P

05/14/2009

Electronic Signature of Signing Officer or Director_____
Date