2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000124605

Entity Name: SONLIGHT STEEL CO., INC.

FILED Jan 05, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2305 HILL ST. NEW SMYRNA BEACH, FL 32169				2227 C.R. 44 WEST EUSTIS, FL 32726		
Current Mailing Address:				New Mailing Address:		
2305 HILL ST. NEW SMYRNA BEACH, FL 32169			2227 C.R. 44 WEST EUSTIS, FL 32726			
FEI Number:	51-0604468	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable () Cer	tificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
FOTHERINGHAM, JOY 226 MCINTOSH RD. ORMOND BEACH, FL 321745517 US 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:						
SIGNATUR		c Signature of Registered Agent	<u> </u>			 Date
Election Cam		Trust Fund Contribution ().	-			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	WEIR, RICHARD 2305 HILL ST.	Delete) BEACH, FL 32169		Title: Name: Address: City-St-Zip:	P (X) Char WEIR, RICHARD 2305 HILL ST. NEW SMYRNA BEAG	nge () Addition CH, FL 32169 US
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP () Char SMITH, CHERYL A 23604 OAK LANE SORRENTO, FL 327	nge (X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	S () Char MCKEON, WILLIAM 7115 TREASURE ISI LEESBURG, FL 347	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	T () Char DAVIS, RON 2245 BLOSSOMWO OVIEDO, FL 32765	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D () Char BERG, FORREST 33246 SOMERSET L LEESBURG, FL 347	
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D () Chai KRAKER, LAWRENC 2303 HILL ST NEW SMYRNA BEAC	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHERYL SMITH VP 01/05/2007