


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2005 08:00 AM
Secretary of State

DOCUMENT # P22483 1. Entity Name INDUSTRIALS CARBONS, INC.	
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Principal Place of Business 1 ROYAL OAK AVENUE ROSWELL, GA 30076 US	Mailing Address 1 ROYAL OAK AVENUE ROSWELL, GA 30076 US
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DO NOT WRITE IN THIS SPACE



04022005 No Chg-P CR2E034 (10/03)

4. FEI Number 43-1181674	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCALLISTER, PAUL 1921 N.W. 17TH PLACE OCALA, FL 34475	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD KEETER, DAREN M. 1821 VERMACK COURT DUNWOODY, GA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KEETER, STEVEN J. 4001 S. DECATUR UNIT 37-493 LAS VEGAS, NV 891035800
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAREY, ROBERT G 2702 CHIMNEY SPRINGS DR. MARIETTA, GA 30062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAREY, ROBERT G. 2702 CHIMNEY SPRINGS DR MARIETTA, GA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/06/05-80057-004 150.00

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Robert G. Carey **ROBERT G. CAREY** 4/4/05 (678) 461-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #