

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

1996 5-17-96

B-6502-C

DOCUMENT # P25197

(5)

1. Corporation Name

STEELCRAFT SERVICE COMPANY INC.

Principal Place of Business

Mailing Address

9017 BLUE ASH
21001 VAN BORN RD
TAYLOR MI 48180
US

C/O MASCOTEC INC
21001 VAN BORN RD
TAYLOR MI 48180
US



2. Principal Place of Business

21 9017 BLUE ASH ROAD

Suite, Apt. #, etc.

22

City & State

23 CINCINNATI, OH.

Zip

24 45242

Country

25

2a. Mailing Address

26 200 CHESTNUT RIDGE ROAD

Suite, Apt. #, etc.

27

City & State

28 WOODCLIFF LAKE, NJ

Zip

29 07675

Country

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

3. Date Incorporated or Qualified

07/14/1989

3a. Date of Last Report

04/19/1995

4. FBI Number

31-1255706

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

Signature, typed or printed name of registered agent and title (if applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MOORE, WILLIAM
STREET ADDRESS 9017 BLUE ASH
CITY-STATE-ZIP CINCINNATI OH ☐ DELETE

TITLE AS
NAME BORAN, DAVID A.
STREET ADDRESS 21001 VAN BORN RD
CITY-STATE-ZIP TAYLOR MI ☒ DELETE

TITLE VD
NAME GARDNER, LEE M.
STREET ADDRESS 21001 VAN BORN RD.
CITY-STATE-ZIP TAYLOR MI ☒ DELETE

TITLE S
NAME SILVERMAN, BARRY J.
STREET ADDRESS 21001 VAN BORN RD.
CITY-STATE-ZIP TAYLOR MI ☒ DELETE

TITLE AT
NAME VOGEL, STEPHEN
STREET ADDRESS 9017 BLUE ASH
CITY-STATE-ZIP CINCINNATI OH ☒ DELETE

TITLE BYE
NAME WADHAMS, TIMOTHY
STREET ADDRESS 21001 VAN BORN RD.
CITY-STATE-ZIP TAYLOR MI ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP ☐ Change ☐ Addition

2.1 TITLE VICE PRESIDENT & DIRECTOR
2.2 NAME THOMAS F. MCBRIDE
2.3 STREET ADDRESS 200 CHESTNUT RIDGE ROAD
2.4 CITY-STATE-ZIP WOODCLIFF LAKE, NJ 07675 ☐ Change ☒ Addition

3.1 TITLE VICE PRESIDENT & DIRECTOR
3.2 NAME PATRICIA NACHTIGAL
3.3 STREET ADDRESS 200 CHESTNUT RIDGE ROAD
3.4 CITY-STATE-ZIP WOODCLIFF LAKE, NJ 07675 ☐ Change ☒ Addition

4.1 TITLE VICE PRESIDENT & TREASURER
4.2 NAME WILLIAM J. ARMSTRONG
4.3 STREET ADDRESS 200 CHESTNUT RIDGE ROAD
4.4 CITY-STATE-ZIP WOODCLIFF LAKE, NJ 07675 ☐ Change ☒ Addition

5.1 TITLE SECRETARY
5.2 NAME RONALD G. HELLER
5.3 STREET ADDRESS 200 CHESTNUT RIDGE ROAD
5.4 CITY-STATE-ZIP WOODCLIFF LAKE, NJ 07675 ☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

VINCENT A. MORNEAU, ATTORNEY-IN-FACT

5/14/96 (201) 573-3091

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF FILING

CR2E034 (12/95)