

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90386 018 ***150.00

DOCUMENT # P93000032551

1. Entity Name
INDUSTRIAL METALS CENTER, INC.



Principal Place of Business
**3147 NW NORTH RIVER DR
MIAMI, FL 33142**

Mailing Address
**3147 NW NORTH RIVER DR
MIAMI, FL 33142**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132006

Chg-P

CR2E034 (11/05)

4. FEI Number
65-0499988

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LORENZO, JUAN C
775 EAST 52 ST.
MIAMI, FL 33013**

7. Name and Address of New Registered Agent

Name **Juan C. Lorenzo**
Street Address (P.O. Box Number is Not Acceptable)
8405 NW 165 TR
City **Miami Lake** FL Zip Code **33016**

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

Juan C. Lorenzo

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DPS** ☐ Delete
NAME **LORENZO, JUAN C**
STREET ADDRESS **775 EAST 52 ST**
CITY-ST-ZIP **MIAMI, FL 33013**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **LORENZO JUAN C.**
STREET ADDRESS **8405 N.W 165 TR**
CITY-ST-ZIP **MIAMI LAKE FL 33016**

TITLE ☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Juan C. Lorenzo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-06