03-10-1999 90051 011 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporation Name

City & State

23

24

ORANGE STATE STEEL, INC.

ARTHUR SABATINELLI

1811 N.W. 16TH STREET POMPANO BEACH FL 33069

Principal Place of Business	Mailing Address	
1811 N.W. 16TH STREET POMPANO BEACH FL 33069 US	1811 N.W. 16TH STREET POMPANO BEACH FL 33069 US	
2. Principal Place of Business	2a. Mailing Address	
21	26	
- Suite, Apt. #, etc.	Suite, Apt. #, etc.	
00	127	

28 Country Zip Country 30 25 29 9. Name and Address of Current Registered Agent

City & State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

01/05/1994 4. FEI Number Applied For 59-3221028 Not Applicable \$8.75 Additional

5. Certificate of Status Desired _____ Fee Required ----\$5.00 May Be 6. Election Campaign Financing

Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible

X Yes ΠNo Personal Property Tax. 10. Name and Address of New Registered Agent

81 82 Street Address (P.O. Box Number is Not Acceptable) 83 Zip Code 85 84 City

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. ☐ Change Addition ☐ DELETE 1.1 TITLE TITLE SABATINELLI, ARTHUR 1.2 NAME NAME 1811 NW 16TH ST 1.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition ☐ DELETE 2.1 TITLE nn e MCDONNELL, JUDITH 2.2 NAME NAME 1811 NW 16TH ST 2.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 2.4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ DELETE ☐ Change 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Addition ☐ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

OR DIRECTOR

2-28-99 954-971-9598 Date Devime Phone #

CR2E034 (11/98