

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

FILED

Jan 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000009946 (0)

1. Corporation Name  
STEEL IMPORT & EXPORT, INC.



Principal Place of Business  
800 S.W. 104 COURT #102  
MIAMI FL 33174

Mailing Address  
800 S.W. 104 COURT #102  
MIAMI FL 33174-2659

3. Date Incorporated or Qualified  
01/31/1996

3a. Date of Last Report

4. FEI Number  
65-0640354

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

2. Principal Place of Business  
21 19808 NW 67 AVE  
Suite, Apt. #, etc.

2a. Mailing Address  
26 19808 NW 67 AVE  
Suite, Apt. #, etc.

22 City & State  
23 Miami, FL

27 City & State  
28 Miami, FL

24 Zip 33015 Country DADC

29 Zip 33015 Country DADC

9. Name and Address of Current Registered Agent

MARTINEZ, ELIZABETH  
800 S.W. 104 COURT #102  
MIAMI FL 33174

10. Name and Address of New Registered Agent

81 Name SAME  
82 Street Address (P.O. Box Number is Not Acceptable)  
19808 NW 67 AVE  
83  
84 City Miami, FL 85 Zip Code 33015

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 conditions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or authorized agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                         |                                 |
|----------------|-------------------------|---------------------------------|
| TITLE          | PD                      | <input type="checkbox"/> DELETE |
| NAME           | GATTI, STEFANO          |                                 |
| STREET ADDRESS | 800 S.W. 104 COURT #102 |                                 |
| CITY-ST-ZIP    | MIAMI FL 33174          |                                 |
| TITLE          | VSD                     | <input type="checkbox"/> DELETE |
| NAME           | MARTINEZ, ELIZABETH     |                                 |
| STREET ADDRESS | 800 S.W. 104 COURT #102 |                                 |
| CITY-ST-ZIP    | MIAMI FL 33174          |                                 |
| TITLE          | TD                      | <input type="checkbox"/> DELETE |
| NAME           | MARTINEZ, MARIA A       |                                 |
| STREET ADDRESS | 800 S.W. 104 COURT #102 |                                 |
| CITY-ST-ZIP    | MIAMI FL 33174          |                                 |
| TITLE          |                         | <input type="checkbox"/> DELETE |
| NAME           |                         |                                 |
| STREET ADDRESS |                         |                                 |
| CITY-ST-ZIP    |                         |                                 |
| TITLE          |                         | <input type="checkbox"/> DELETE |
| NAME           |                         |                                 |
| STREET ADDRESS |                         |                                 |
| CITY-ST-ZIP    |                         |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                   |                 |   |
|-------------------|-----------------|---|
| 11 TITLE          | SAME            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME           | SAME            |   |
| 13 STREET ADDRESS | 19808 NW 67 AVE |   |
| 14 CITY-ST-ZIP    | Miami, FL 33015 |   |
| 21 TITLE          | GANE            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME           | GANE            |   |
| 23 STREET ADDRESS | 19808 NW 67 AVE |   |
| 24 CITY-ST-ZIP    | Miami, FL 33015 |   |
| 31 TITLE          | SAME            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME           | SAME            |   |
| 33 STREET ADDRESS | 19808 NW 67 AVE |   |
| 34 CITY-ST-ZIP    | Miami, FL 33015 |   |
| 41 TITLE          |                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME           |                 |   |
| 43 STREET ADDRESS |                 |   |
| 44 CITY-ST-ZIP    |                 |   |
| 51 TITLE          |                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME           |                 |   |
| 53 STREET ADDRESS |                 |   |
| 54 CITY-ST-ZIP    |                 |   |
| 61 TITLE          |                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME           |                 |   |
| 63 STREET ADDRESS |                 |   |
| 64 CITY-ST-ZIP    |                 |   |

14. I do 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 given attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-10-97

559-3855

Date

Daytime Phone #

CR2E034 (9/96)