


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 05, 2004 8:00 am**  
**Secretary of State**

08-05-2004 90008 048 \*\*\*158.75

**DOCUMENT # P97000094817**

1. Entity Name  
**STALLION STEEL, INC.**



Principal Place of Business  
**4413 MARION STREET  
 MARIANNA, FL 32448**

Mailing Address  
**P.O. BOX 6307  
 MARIANNA, FL 32447**

24078300



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

07282004 Chg-P CR2E034 (10/03)

City & State

4. FEI Number  
**59-3489113**

Applied For  
 Not Applicable

Zip Country Zip Country

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

**6. Name and Address of Current Registered Agent**

**HARKINS, JAMES E JR  
 4413 MARION STREET  
 MARIANNA, FL 32448**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restating) DATE

**FILE NOW!!! FEE IS \$150.00  
 Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>HARKINS, JAMES E JR</b> <b>3124 FOURTH STREET</b> <b>MARIANNA, FL 32447</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

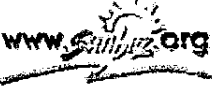
SIGNATURE: James E. Harkins Jr. **8/5/04** **850/526-3301**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment  
24078503

Division of Corporations

Annual Report

Page 1



Document Number  
P97000094817  
Business Entity Name  
STALLION STEEL, INC.

After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

FEI Number   
FEI Number Status  Applied For  Not Applicable  Current  
Certificate of Status Desired  Yes  No

Principal Place of Business

Address   
Suite, Apt. #, etc.   
City, State    
Zip Code & Country

Mailing Address

Address   
Suite, Apt. #, etc.   
City, State    
Zip Code & Country

Name And Address of Registered Agent

Name (Last, First, Middle, Title)      
-or- RA Business Name   
Address   
Suite, Apt. #, etc.   
City, State

Attachment  
24078503



Division of Corporations

Annual Report

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Document Number  
**P97000094817**  
Business Entity Name  
**STALLION STEEL, INC.**

Election Campaign Financing Trust Fund Contribution  Yes  No

Officer/Director Name And Address

Title	D			
Name (Last, First, Middle, Title)	HARKINS	JAMES	E	JR
-or- Entity Name				
Street Address	4293 LIDDON STREET			
City, State	MARIANNA		FL	
Zip Code & Country	32446			
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				
Title				
Name (Last, First, Middle, Title)				
-or- Entity Name				
Street Address				
City, State				
Zip Code & Country				

Attachment  
24008503  
# 9700009487

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

List more than six Officers/Directors  No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

Officer/Director Signature

Attachment  
24078503



Division of Corporations

Annual Report

Payment Page

Document Tracking # - 300039361163

For

Corporate Annual Report # - P97000094817

The charge amount for your filing is \$150.00.

Payment

If you experience a problem during the payment process and do not receive your final acknowledgement from the Division of Corporations, please contact our help desk at (850) 245-6939.

When you receive your final acknowledgement, your document will be processed within 48 hours.

When your document is filed, we will mail any requested documents to the return address listed on the form.

Please select one of the payment options listed below.

Credit Card Payment

If you press the 'Credit Card Payment' button from this screen, you will be sent to the payment screen to be charged for this filing.

Sunbiz E-file account number

Password

E-mail Address

Sunbiz E-file Account Payment    Reset

If you enter an account number and password and press the 'Sunbiz E-file Account Payment' button from this screen, your account will be charged.

Please Note

If you have used the browser 'BACK' button to get to this page, you should use the browser 'FORWARD' button to move to the next page.

Start Over

Attachment  
240783B



Division of Corporations

Receipt

Your data entry is complete. This is your receipt page. Please print and retain this page for your records.

Document Number: **P97000094817**

Tracking Number: **300039361163**

The charge for your Annual Report is  
**\$150.00**

If you want to review your document, use the browser back button to return to page 1 of the data entry. Use the browser forward button to come back to this page.

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To proceed to pay for the Annual Report, press the CONTINUE button below.

By pressing the CONTINUE button, your Annual Report will be placed in processing and no additional Annual Reports may be filed for this corporation until this one is processed.

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