

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90393 032 ***150.00

DOCUMENT # P99000029511 1. Entity Name LIGHTNING STEEL, INC.			
Principal Place of Business 1915 KETTLER DRIVE LUTZ, FL 33549 US		Mailing Address 1915 KETTLER DRIVE LUTZ, FL 33549 US	
2. Principal Place of Business 7802 West Drive Suite, Apt. #, etc.		3. Mailing Address 7802 West Drive Suite, Apt. #, etc.	
City & State Wesley Chapel, FL Zip 33544		City & State Wesley Chapel, FL Zip 33544	
Country USA		Country USA	
4. FEI Number 59-3567938		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBINSON, JOHN B 1915 KETTLER DRIVE 7802 West Drive LUTZ, FL 33549 Wesley Chapel, FL 33544 * Change of Address Only *		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete PD ROBINSON, JOHN B 1915 KETTLER DRIVE 7802 West Drive LUTZ, FL 33549 Wesley Chapel, FL 33544	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete VSTD ROBINSON, LORI L 1915 KETTLER DRIVE 7802 West Drive LUTZ, FL 33549 Wesley Chapel, FL 33544	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 JOHN B. ROBINSON - President		Date 1-13-06 (813) 310-5105	