


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

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| DOCUMENT # V68396 1. Entity Name REYERSON INDUSTRIES, INC. |  |
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| Principal Place of Business 40169 ST. #813 MIAMI BEACH, FL 33141 US | Mailing Address P.O. BOX 653303 MIAMI, FL 33265-3303 US |
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DO NOT WRITE IN THIS SPACE



04172008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 65-0371117 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent COHEN, LEONARD 4825 S.W. 154 AVENUE MIAMI, FL 33185 |
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IN THIS SPACE**

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.

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| SIGNATURE _____ <small>Signature typed or printed name of registered agent and title if applicable</small> | (NOTE: Registered Agent signature required when reinstating) | DATE _____ |
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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | UN00000926216 05/20/08-80059-001 150.00 |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|

| 10. OFFICERS AND DIRECTORS | |
|------------------------------------------------|----------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P COHEN, LEONARD 4825 S.W. 154 AVENUE MIAMI, FL 33185 |
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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.

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|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|
| SIGNATURE: <u>Leonard Cohen</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <u>04/24/08</u> <small>Date</small> | <u>386-344-3624</u> <small>Daytime Phone</small> |
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