## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001658

Entity Name: EARLE M. JORGENSEN COMPANY

**Current Principal Place of Business:** 

350 S. GRAND AVE. **SUITE 5100** 

LOS ANGELES, CA 90071

**Current Mailing Address:** 

350 S. GRAND AVE.

**SUITE 5100** 

LOS ANGELES, CA 90071 US

FEI Number: 65-1269024 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** Apr 06, 2017

**Secretary of State** 

CC7594494672

Officer/Director Detail:

**PRESIDENT** Title Title

HOFFMAN, JAMES D. Name DESMOND, JAMES Name Address 10650 ALAMEDA STREET Address 350 S. GRAND AVE.

**SUITE 5100** 

CEO

City-State-Zip: LYNWOOD CA 90262 City-State-Zip: LOS ANGELES CA 90071

Title VICE PRESIDENT/CFO Title

LEON, E. GILBERT JR. Name PRESIDENT/SECRETARY/DIRECTOR

Name LEWIS. KARLA R. Address 10650 ALAMEDA STREET Address 350 S. GRAND AVE. City-State-Zip: LYNWOOD CA 90262

**SUITE 5100** 

LOS ANGELES CA 90071 City-State-Zip: Title VICE PRESIDENT/DIRECTOR MOLLINS, GREGG J.

Name 350 S. GRAND AVE. Address

City-State-Zip: LOS ANGELES CA 90071

**SUITE 5100** 

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

04/06/2017 SIGNATURE: KARLA R. LEWIS **SECRETARY**