

**2018 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: NOT APPLICABLE**

**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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            DESMOND, JAMES  
Address        10650 ALAMEDA STREET  
City-State-Zip: LYNWOOD CA 90262

Title            DIRECTOR  
Name            MOLLINS, GREGG J.  
Address        350 S. GRAND AVE.  
                 SUITE 5100  
City-State-Zip: LOS ANGELES CA 90071

Title            DIRECTOR  
Name            LEWIS, KARLA R.  
Address        350 S. GRAND AVE.  
                 SUITE 5100  
City-State-Zip: LOS ANGELES CA 90071

Title            VICE PRESIDENT OF  
                 MERCHANDISING  
Name            DURHAM, JEFFREY  
Address        1900 MITCHELL BLVD.  
City-State-Zip: SCHAUMBURG IL 60193

Title            SECRETARY  
Name            LEWIS, KARLA R.  
Address        350 S. GRAND AVE.  
                 SUITE 5100  
City-State-Zip: LOS ANGELES CA 90071

*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.*

**SIGNATURE: KARLA R. LEWIS**

**SECRETARY**

**04/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date