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Feb 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000402 (8)

1. Corporation Name
PREUSSAG INTERNATIONAL STEEL CORPORATION



Principal Place of Business: 200 NE 7TH STREET HALLANDALE FL 33009
Mailing Address: 200 NE 7TH STREET HALLANDALE FL 33009-2426

3. Date Incorporated or Qualified: 01/28/1993
3a. Date of Last Report: 03/18/1996
4. FEI Number: 58-1448179
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
MCGIVNEY, PETER A
200 NE 7TH STREET
HALLANDALE FL 33009

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____
Signature: Sign the printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	NOLTE, HARTMUT DR.	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD N.E. SUITE 595	
CITY-ST-ZIP	ATLANTA GA	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	BOTTERBUSCH, REINER	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD NE SUITE 595	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SEEGER, PETER	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD NE SUITE 595	
CITY-ST-ZIP	ATLANTA GA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	OSMERG, WOLFGANG	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD NE SUITE 595	
CITY-ST-ZIP	ATLANTA GA 30342	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BRINKMANN, GISELA	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD NE SUITE 595	
CITY-ST-ZIP	ATLANTA GA	
TITLE	TV	<input type="checkbox"/> DELETE
NAME	SMITH, DOUG	
STREET ADDRESS	5780 PEACHTREE-DUNWOODY RD NE SUITE 595	
CITY-ST-ZIP	ATLANTA GA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DOUG SMITH DATE: 1/10/97 DAYTIME PHONE: 404-257-9373
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: DOUG SMITH

CR2E034 (9/96)