


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90439 034 ***150.00

40073017



| | | | | | |
|---|--------------------------|--|---|--|--|
| DOCUMENT # F93000005219 | | | |  | |
| 1. Entity Name STRATEGIC MATERIALS, INC. | | | | | |
| Principal Place of Business 1505 HWY 6 SOUTH STE 100 HOUSTON, TX 77077 | | | Mailing Address 1505 HWY 6 SOUTH STE 100 HOUSTON, TX 77077 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 76-0297116 | |
| | | | | Applied For Not Applicable | |
| | | | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLHASSEE, FL 32301 | | | 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 _____ (NOTE: Registered Agent signature required when renaming) _____ DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 | D | <input checked="" type="checkbox"/> Delete | TITLE | C/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | HALE, RANDALL B | | NAME | MICHAEL FORLENZA | |
| STREET ADDRESS | 2929 ALLEN PKWY STE 2500 | | STREET ADDRESS | 780 THIRD AVENUE, 40TH FLOOR | |
| CITY-ST-ZIP | HOUSTON, TX 77019 | | CITY-ST-ZIP | NEW YORK, NY 10017 | |
| TITLE | PSD | <input type="checkbox"/> Delete | TITLE | V/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | CORLEY, I T | | NAME | DOUGLAS BAGIN | |
| STREET ADDRESS | 1505 HWY 6 SOUTH STE 100 | | STREET ADDRESS | 780 THIRD AVENUE, 40TH FLOOR | |
| CITY-ST-ZIP | HOUSTON, TX 77077 | | CITY-ST-ZIP | NEW YORK, NY 10017 | |
| TITLE | VT | <input type="checkbox"/> Delete | TITLE | V/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | GOERTZ, ALLAN | | NAME | JAMES MCNAIR | |
| STREET ADDRESS | 1505 HWY 6 SOUTH STE 100 | | STREET ADDRESS | 70 WEST MADISON ST., SUITE,1400 | |
| CITY-ST-ZIP | HOUSTON, TX 77077 | | CITY-ST-ZIP | CHICAGO, IL 60602 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete | TITLE | V/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | HALE, RANDALL B | | NAME | GEORGE HENRY | |
| STREET ADDRESS | 500 MAYO SHELL ROAD | | STREET ADDRESS | 780 THIRD AVENUE, 40TH FLOOR | |
| CITY-ST-ZIP | GALENA PARK, TX 77547 | | CITY-ST-ZIP | NEW YORK, NY 10017 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete | TITLE | S/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | LEHMAN, NOLAN | | NAME | MICHAEL LEE | |
| STREET ADDRESS | 2929 ALLEN PKWY STE 2500 | | STREET ADDRESS | 780 THIRD AVENUE, 40TH FLOOR | |
| CITY-ST-ZIP | HOUSTON, TX 77019 | | CITY-ST-ZIP | NEW YORK, NY 10017 | |
| TITLE | VD | <input type="checkbox"/> Delete | TITLE | V | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | BUCEY, CURTIS | | NAME | KEITH HARRADENCE | |
| STREET ADDRESS | 1505 HWY 6 SOUTH STE 100 | | STREET ADDRESS | 235 WILKINSON ROAD | |
| CITY-ST-ZIP | HOUSTON, TX 77077 | | CITY-ST-ZIP | BRAMPTON, ONT, CANADA, L6T4M2 | |
| 12. I 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 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: <i>Alan J. Hertz</i> | | VICE PRES. | | 4-27-05 281-966-5700 | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date | | Daytime Phone # | |

ATTACHMENT

#F93000005219

40075017

STRATEGIC MATERIALS, INC.

ADDITIONAL OFFICERS AND DIRECTORS

TITLE

NAME AND ADDRESS

V

MARY FRAZER
235 WILKINSON ROAD
BRAMPTON, ONT, CANADA L6T4M2