2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 424043

1. Entity Name

SCOTT STEEL, INC.

FILED
Mar 22, 2000 8:00 am
Secretary of State
03-22-2000 90181 011 ***150.00

Principal Place of Business	Mailing Address
151 REGIONS WAY. SUITE 1-B DESTIN FL 32541 US	151 REGIONS WAY. SUITE 1-B DESTIN FL 32541-5106 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
151 Regions Way	151 Regions Way
Suite, Apt. #, etc.: Building 5, Suite D	Suite, Apt. #, etc.: Building 5, Suite D
City & State: Destin, FL	City & State: Destin FL
Zip: 32541 Country:	Zip: 32541 Country:

4. FEI Number 59-1460273 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCOTT, JOHN L. JR 151 REGIONS WAY SUITE 1B DESTIN FL 32541	Name: Street Address (P.O. Box Number is Not Acceptable): 151 Regions Way Building 5, Suite D City: Destin FL Zip Code: 32541

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.

SIGNATURE [signature] DATE 3/21/00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD SCOTT, JOHN L. JR. 151 REGIONS WAY, STE. 1-B DESTIN FL 32541 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition 151 Regions Way, Building 5, Suite D Destin FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] JOHN L. SCOTT, JR. PRESIDENT 3/21/00 (850)650-2292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #