

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

05 MAY -1 PM 9:26

DOCUMENT # 438876 (5)

1. Corporation Name

U.S. FLANGE & PIPE FITTING CORPORATION

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**2853 DAWN ROAD
JACKSONVILLE FL 32207**

Mailing Address

**2853 DAWN ROAD
JACKSONVILLE FL 32207**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1973

3a. Date of Last Report

04/26/1994

2. Principal Place of Business

21 7833 Bayberry Rd

2a. Mailing Address

26 7833 Bayberry Rd

4. FEI Number

59-1520104

Applied For

Not Applicable

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

22

City & State

Jacksonville, FL

27

City & State

Jacksonville, FL

24

Zip

32256

Country

Duval

29

Zip

32256

Country

Duval

9. Name and Address of Current Registered Agent

**WOLFSON, RICHARD J.
2853 DAWN ROAD
JACKSONVILLE FL 32207**

Richard J. Wolfson

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7833 Bayberry Rd

83

84 City

Jacksonville, FL

85 Zip Code

32256

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

Richard J. Wolfson

4/28/95

Signature (Typed or printed name of registered agent and the date)

Signature (Typed or printed name of registered agent and the date)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**PTD
WOLFSON, SAUL
2853 DAWN RD
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**VD
WOLFSON, RICHARD J.
2853 DAWN RD
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**S
GOLDSTEIN, S.W.
603 BLACKSTONE BLDG.
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

**D
WOLFSON, HAZEL M
4152 ALHAMBRA DRIVE WEST
JACKSONVILLE FL**

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

**7833 Bayberry Rd
Jacksonville, FL 32256**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

**7833 Bayberry Rd
Jacksonville, FL 32256**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (17)(3)(b), 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 manager 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:

Richard J. Wolfson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95
DATE

904 733 0188
TELEPHONE