FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # 529583 (7)

1. Corporation Name
UTILITY PIPING SYSTEMS, INC.

Principal Place of Business
4492 HIDDEN PINE CT
MULBERRY FL 33860
US

Mailing Address
4492 HIDDEN PINE COURT
MULBERRY FL 33860
US

3. Date Incorporated or Qualified: 03/18/1977
3a. Date of Last Report: 02/28/1995
4. FEI Number: 59-1729709 ☐ 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

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
HARRIS, MARTHA B.
4492 HIDDEN PINE COURT
MULBERRY FL 33860

10. Name and Address of New Registered Agent
81 Name: PAUL E HARRIS
82 Street Address (P.O. Box Number is Not Acceptable): 4492 Hidden Pine CT
83 mulberry
84 City — FL 85 Zip Code 33860

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: Paul E Harris — 5/21/96 DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	HARRIS, MARTHA B.	
STREET ADDRESS	4492 HIDDEN PINE CT	
CITY-ST-ZIP	MULBERRY FL	
TITLE	S	☐ DELETE
NAME	HARRIS, PAUL SR.	
STREET ADDRESS	4492 HIDDEN PINE CT	
CITY-ST-ZIP	MULBERRY FL	
TITLE	D	☒ DELETE
NAME	HARRIS, PAUL SR.	
STREET ADDRESS	4492 HIDDEN PINE COURT	
CITY-ST-ZIP	MULBERRY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	HARRIS PAUL E SR.	
2.3 STREET ADDRESS	4492 Hidden Pine Ct.	
2.4 CITY-ST-ZIP	Mulberry F 33860	
3.1 TITLE	TS	☐ Change ☒ Addition
3.2 NAME	Shelter Herk	
3.3 STREET ADDRESS	1919 Speaker Dr	
3.4 CITY-ST-ZIP	Auburndale, Fl 33823	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Paul E Harris — 5/21/96 — 941-425-0517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

CR2E034 (12/95)