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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 826705 (6)

1. Corporation Name

MANNESMAN PIPE & STEEL CORPORATION

Principal Place of Business

1990 POST OAK BLVD., SUITE 1800
HOUSTON TX 77056

Mailing Address

1990 POST OAK BLVD., SUITE 1800
HOUSTON TX 77056



3. Date Incorporated or Qualified

08/31/1971

3a. Date of Last Report

02/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORP. SYST. INC.
1201 HAYES ST.
STE 105
TALLAHASSEE FL 32301

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

Signature, typed or printed name of registered agent and title (applicable)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME GEORG, RUDOLF
STREET ADDRESS 1990 POST OAK BLVD #1800
CITY-STATE-ZIP HOUSTON TX

TITLE TD ☒ DELETE

NAME LAUTERBACH, HEINZ-G
STREET ADDRESS 1990 POST OAK BLVD #1800
CITY-STATE-ZIP HOUSTON TX

TITLE V ☐ DELETE

NAME BOKELOH, FRANK
STREET ADDRESS 1990 POST OAK BLVD #1800
CITY-STATE-ZIP HOUSTON TX

TITLE S ☐ DELETE

NAME TAYLOR, TIM A.
STREET ADDRESS 1990 POST OAK BLVD #1800
CITY-STATE-ZIP HOUSTON TX

TITLE D ☐ DELETE

NAME HANS P. SCHMELZER
STREET ADDRESS NIEDER KASSELER LOHWEG 20 4000
CITY-STATE-ZIP DUESELDORF GE

TITLE D ☐ DELETE

NAME BERNARD SCHNEIDER
STREET ADDRESS 450 PARK AVENUE 24TH FL
CITY-STATE-ZIP NEW YORK NY

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

VSD

D
Gottfried Noelle
Mannesmannufer 3
Duesseldorf GE

Manfred Becker

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 a true 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, or as agent, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TIM A. TAYLOR

2/15/96

Date

(713) 960-1900

Daytime Phone #

CR2E034 (12/95)