2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 11, 2003 8:00 am Secretary of State

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DOCUMENT # F0000005262 1. Entity Name STEEL BUILT CORPORATION								03-31-2	003 90115 0	11 ***	150.00	
Principal Place of Business 350 14TH STREET AMBRIDGE PA 15003			Mailing Address 380 14TH STREET AMBRIDGE PA 15003				1 / 111 /200	11) fa llt br it bi llt	Bi rek Culle Olikh Doft	H BUMB LEDIO	: C2314 1101 1881	٨
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 23-291			00 -		pplied For ot Applicabl	e	
Zip Country		Zip	Country			5. Certificate of Status Desired \$8.75 Additional Fee Required						
6. Name and Address of Current Registered Agent					Name		- Name and /	Address of No	N Registered Ag	ent		┨:
CORPOR	<u></u>	Street Address (P.			P.O. Box Number is Not Acceptable)							
	/s street Ssee Fl 3230	11.2526										-
IALEADA	OOEE PL OCOL) 1-2029		City	™ Zip Coo					ie .		
					City FL Zip Code cred office or registered agent, or both, in the State of Florida. I am familiar with, and a						-	\dashv
the obliga	itions of register	ed agent.										1
SIGNATURE	Signature, typed or	printed name of registered agent an	d title if applicable (NOTE	: Registered	f Apent signat	ure required when	reinstating)	·	DATE			
							1					┥
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of			••••				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
Make Chec	K Payable to I	OFFICERS AND D		11,			DDITIONS 40	LIANDED TO C	CEICEOC AND D	PECTOR	O IN 11	
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NAME	DAVIS, ARNI	DLD	C Delete	NAME		ĺ			_	_ c		CR2E034 (10/02)
STREET ADDRESS 360 14TH STREET				STREET ADDRESS		· .						
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STREET ADDRESS	ENGKJER, W 3431 4TH AV			T ADDRESS								
CITY-ST-ZIP FARGO ND 58103-2222					ST-ZIP	ĺ						ŀ
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_NAME	DAVIS, SHAY			_ NAME		DAVIS,	SHAWN	150 HI	63			
STREET ADDRESS CITY-ST-ZIP	loops west impossing pers.				T ADDRESS ST-ZIP	Baca	DAVIS, SHAWN 155 E. MIZNER, 416B BOCA RATON, FL 33432					
TITLE	TD		☐ Delete	TITLE		, , <u>, , , , , , , , , , , , , , , , , </u>	117,000	 		Change	Addition	.7
NAME	ENGKJER, G			NAME								
STREET ADDRESS CITY-ST-ZIP	512 CHARTIE				T ADORESS							1
	MCKEES HU	CKS PA 15136-3804	Прин	CITY-S	\$1-ZIP	4000	SOBETA	e.v		1 0	10/100	4
TITLE NAME	1		☐ Delete	TITLE		MICHA	EL A. N	ESBITT	Ĺ		Addition	
STREET ADDRESS	}				T ADDRESS	360 1	YTH ST		(NOT A)	HRECT	OR)	
CITY-ST-ZIP	ļ			CITY-S	\$1-ZIP	AMBRI	68, PA	15003	·············			
TITLE NAME			Delete	TITLE NAME]] Change	☐ Addition	
STREET ADDRESS	[T ADDRESS							
CITY-ST-ZIP	1			CLTY-S								1

12. I hereby certify that the information supplied with this filling 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, wittyall other like empowered.

SIGNATURE:

SINITED OR PRINTED PAME OF STOWING OFFICER OR DIRECTOR AS S'S

3-21-63 (724) 266-6486