

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F02000003265

1. Entity Name
BSI COMMODITIES INC.



FILED
04 MAR -3 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03012004 Chg-P CR2E034 (10/03)

Principal Place of Business
4955 STEUBENVILLE PIKE
PITTSBURGH, PA 15205-9604

Mailing Address
4955 STEUBENVILLE PIKE
PITTSBURGH, PA 15205-9604

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
33-1002431

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

600030669786
10/04--01052--017 **150.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
KARPAKIS, GEORGE J
4955 STEUBENVILLE PIKE
PITTSBURGH, PA 152059604 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
George Karpakis
4955 Steubenville Pike
Pittsburgh, PA 15205-9604 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TAS
DMITRZAK, GARY D
4955 STEUBENVILLE PIKE
PITTSBURGH, PA 152059604 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Gary D. Dmistrzak
4955 Steubenville Pike
Pittsburgh, PA 15205-9604 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
NEUMANN, MICHAEL J
1360 POST OAK BOULEVARD STE. 150
HOUSTON, TX 770563020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Robert A. Springhetti
4955 Steubenville Pike
Pittsburgh, PA 15205-9604 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
RHODES, M RUTH
1360 POST OAK BOULEVARD STE. 150
HOUSTON, TX 770563020 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Terence G. M. Briant
Joechlerweg 2, PO Box 105
Baar Switzerland ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Chris Campbell
Verheeskade 25, The Hague
Zuid-Holland 2521 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Richard P. Gross
4955 Steubenville Pike
Pittsburgh, PA 15205-9604 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: M. Ruth Rhodes M. Ruth Rhodes, Asst. Sec. 3/1/04 713-961-8512

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #