

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90142 028 ***150.00

DOCUMENT # F35214

1. Entity Name
GLOBAL PIPE AND SUPPLY, INC.



Principal Place of Business
**1160 NE 24TH CT.
FORT LAUDERDALE FL 33305**

Mailing Address
**PO BOX 11224
FT LAUDERDALE FL 33339-1224**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2091945**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCARDUZIO, FRANK A
2417 NE 37TH ST
FT LAUDERDALE FL 33308**

Name **FRANK Scarduzio**
Street Address (P.O. Box Number is Not Acceptable)
1160 NE 24th. Court
City **Ft. Lauderdale** FL Zip Code **33305**

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 *Frank Scarduzio* **Prez Frank Scarduzio 1-7-03**
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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Delete
NAME **SCARDUZIO, FRANK A**
STREET ADDRESS **2417 NE 37TH ST**
CITY-ST-ZIP **FT LAUDERDALE, FL 00000**

TITLE **Prez DP** ☐ Change ☐ Addition
NAME **FRANK Scarduzio**
STREET ADDRESS **1160 NE 24th. Court**
CITY-ST-ZIP **Ft. Lauderdale, FL 33305**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: *Frank Scarduzio*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-03 954 561 0474
Date Daytime Phone #

037113 AV

CR2E034 (10/02)