

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2004 8:00 am
Secretary of State

02-10-2004 90008 024 ***150.00

DOCUMENT # F96000000550

1. Entity Name
EB PIPE COATING, INC.



Principal Place of Business
**1700 E AVE, PORT INDUSTRIAL PARK
PANAMA CITY, FL 32401**

Mailing Address
**P.O. BOX 59770
PANAMA CITY, FL 32412**

54004428



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-3516666

Applied For

Not Applicable

Zip

Country

Zip

Country

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 reinstalling)

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

PAGE 1

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CB** ☒ Delete
NAME **BLOME, PETER**
STREET ADDRESS **FRIEDRICH-EBERT-STRASSE 154**
CITY-ST-ZIP **MULHEIM A.D. RUHR, GERMANY, D-4543**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MD** ☒ Delete
NAME **GUNTER, MALLY**
STREET ADDRESS **FRIERICH-EBERT-STRASSE**
CITY-ST-ZIP **MULHEIM A.D. RUHR, GERMANY, D-4543**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MD** ☐ Delete
NAME **DELIE, DAVID**
STREET ADDRESS **5315 W. 19TH ST**
CITY-ST-ZIP **PANAMA CITY, FL 32401**

TITLE **P/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MD** ☒ Delete
NAME **HEISS, ROBERT**
STREET ADDRESS **FRIEDRICH-EBERT-STRASSE**
CITY-ST-ZIP **MULHEIM A.D. RUHR, GERMANY, D-4543**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MD** ☒ Delete
NAME **LOPER, WAYNE**
STREET ADDRESS **5315 W. 19TH ST.**
CITY-ST-ZIP **PANAMA CITY, FL 32401**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **MD** ☐ Delete
NAME **WILLIAMSON, RON**
STREET ADDRESS **5315 W. 14TH ST.**
CITY-ST-ZIP **PANAMA CITY, FL 32401**

TITLE **V/D** ☒ Change ☐ Addition
NAME **5315 W. 19TH ST.**
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY

2/06/04

Date


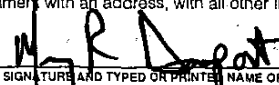
850-873-8007

Daytime Phone #

2004 FOR PROFIT CORPORATION ANNUAL REPORT

Attachment

54004428

DOCUMENT # F96000000550			
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Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		01072004 Chg-P CR2E034 (10/03)	
		4. FEI Number 59-3516666	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$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	
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SIGNATURE _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CB BLOME, PETER FRIEDRICH-EBERT-STRASSE 154 MULHEIM A.D. RUHR, GERMANY, D-4543 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALAN HODGSON 5315 W. 19TH ST. PANAMA CITY, FL 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD GUNTER, MALLY FRIEDRICH-EBERT-STRASSE MULHEIM A.D. RUHR, GERMANY, D-4543 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D MURRAY DAVENPORT 5315 W. 19TH ST. PANAMA CITY, FL 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD DELIE, DAVID 5315 W. 19TH ST PANAMA CITY, FL 32401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STEVE McCONKEY 5315 W. 19TH ST PANAMA CITY, FL 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD HEISS, ROBERT FRIEDRICH-EBERT-STRASSE MULHEIM A.D. RUHR, GERMANY, D-4543 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD LOPER, WAYNE 5315 W. 19TH ST. PANAMA CITY, FL 32401 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE:  SECRETARY		2/06/04 850-873-8007	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	