## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **F96000003533** Apr 22, 2000 8:00 am Secretary of State 1. Entity Name AMERICAN STANDARD ENVIRONMENTAL, INC. 04-22-2000 90063 028 \*\*\*176.25 Principal Place of Business Mailing Address 600 GRANT ST #P-2-6 600 GRANT ST #P-2-6 PITTSBURGH PA 15106-1204 PITTSBURGH PA 15219 3. Mailing Address 2. Principal Place of Business 128 Hanover Street 128 Hanover Street DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For 4. FEI Number City & State Carnegie. 25-1738526 PA Carnegie, PA Not Applicable Country Zip 15106 Country \$8.75 Additional 5. Certificate of Status Desired USA 15106 Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name David Ginsburg **CUTLER, HARRY** Street Address (P.O. Box Number is Not Acceptable) 7510 SUN KEY BLVD #3321 WINTER PARK FL 32792 8929 Charleston Park City Orlando 8. The above named entity adomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. d abent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ■ Addition TITLE ☐ Delete CIOPPA, TODD J NAME STREET ADDRESS STREET ADDRESS 101 NORTHBROOK DR CITY-ST-ZIP CITY-ST-7IP GIBSONIA PA 15044 ☐ Change Addition TITLE TITLE **XX** Delete NAME GREGORY, MARCELLO A NAME STREET ADDRESS STREET ADDRESS 1400 SMOKEYWOOD DR. 802 CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15218 ☐ Change Addition ☐ Delete TITHE RUTH ANN, HOLZAPFEL NAME STREET ADDRESS STREET ADDRESS 944 RINGGOLD ST. CITY-ST-ZIP CITY-ST-ZIP PITTSBURGH PA 15220 ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 11 or Block 12 if

SIGNATURE:

mpowered

of the corporation or the receiver or trustee empowered to exchanged, or on an attachment with an address, with all other in