2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 08:00 AM
Secretary of State

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1. Entity Name

SUMMIT STEEL FABRICATORS, INC.



Principal Place of Business

2004 FEDERAL ROAD HOUSTON, TX 77015

Mailing Address

2004 FEDERAL ROAD HOUSTON, TX 77015



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

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

DO NOT WRITE IN THIS SPACE

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8. The above the obligati	named entity submits this statement for the pons of registered agent.	urpose of changing its registere	d office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept		
SIGNATURE_						
	Signature, typed or printed nume of registered agent and title i	applicable. (NOTE Registered	Agent signature required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	sing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	graph of the contract of the	A SECRET AND A SECRETARIAN ASSETTION ASSETTIO		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD RODRIGUEZ, ROLAND 6313 RAVENWOOD DRIVE PEARLAND, TX <i>1</i> 7584		U00000607188 01/31/07-80027-010 150.00 DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, ERASMO 402 TAHITI DR GALVESTON, TX 77554					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	-				
NAME STREET ADDRESS CITY-ST-ZIP	•	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ماند المشاركة والماركة والمارك					

12. I hereby certify that the information supplied with this fluid does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplier early report to the corporation or the receiver of trusteelempting and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director—of the corporation or the receiver of trusteelempting and officer or director that one of the corporation or the receiver of trusteelempting and officers, with all one like suppowered.

SIGNATURE:

NAME STREET ADDRESS CITY-\$T-ZIP

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/01 (113) 451-6 960
Daylime Prone #