## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** G26510

(9)

**FILED** Apr 16 1998 8:00am Secretary of State

SEABO	DARD PIPE & SUPPLY, I	NC.			
Principal Plac	e of Business	Mailing Address		T HORINI DOLO HANDO OHROL OLIGH FIOLE ODII	BIBK BIBK BIBKI BIBKI BIBK BIBK IBBI
8636 110TH ST. 8636 110TH ST. SEBASTIAN FL 32958			DO NOT WRITE I	N THIS SPACE	
:				3. Date Incorporated or Qualified	THIS OF ACE
				03/04/1983	
2. Principal P	Place of Business	2a, Mailing Address		4, FEI Number	Applied For
21		26		59-2289464	Not Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			CO 75 Addition 1
22		27		5. Certificate of Status Desired	Fee Required
<b>⊢</b> , ·		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible
24	25	29	30	Personal Property Tax due June 3	
	9. Name and Address of Cu	irrent Registered Agent		10. Name and Address of New Reg	stered Agent
BR	RTO,PHILIP		81 Name		
6636 110TH ST.			82 Street Add	dress (P.O. Box Number is Not Acceptable	9)
SEBASTIAN FL 32958					,
			83		
			64 City		les Latin Code
					FL 85 Zip Code
11, Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	.0502 and 607.1508, Florida Statute state of Florida. Such change was a abligations of, Section 607.0505, Flo	es, the above-named con authorized by the corpora orida Statules.	rporation submits this statement for the pu ation's board of directors. I hereby accept	pose of changing its registered the appointment as registered
SIGNATURE	Signature, typed or printed name of registern	id agent and little if applicable (NOTE	Registered Agent signature requ	uired when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Brito, Philip		1.2 NAME		
STREET ADDRESS	6636 110TH ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	SEBASTIAN FL		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2.1 TITLE		Change Addition
NAME	Brito, Patricia		2.2 NAME		
STREET ADDRESS	6638 110TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	SEBASTIAN FL		2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	TATA altria	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	- <del></del>		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		!
			0.10117 OF E31		

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 annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address

DHILLP BRITO

561 589-5962