FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 04, 2001 8:00 am Secretary of State **DOCUMENT # J71343** STRUCTALL BUILDING SYSTEMS, INC. 04-04-2001 90103 009 ***158.75 Principal Place of Business Mailing Address 350 BURBANK RD. 350 BURBANK RD. JUULUR OLDSMAR FL 34677 OLDSMAR FL 34677 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-2806308 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LITTLE, THOMAS C Street Address (P.O. Box Number is Not Acceptable) 2123 NE COACHMAN RD STE A CLEARWATER FL 34625 City 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. SIGNATURE Signature, typed or printed name of registered agent and title it 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 CR2E034 (10/00 TITLE ☐ Delete TITLE MEYERSON, STEVEN NAME NAME 350 BURBANK RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP OLDSMAR FL Addition TITLE ☐ Delete TITLE ☐ Change MCCREERY, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 34515 CEDARFIELD DR. CITY-ST-ZIP CITY-ST-ZIP RIDGE MANOR FL TITLE Delete TITLE Change Addition MCCREERY, D. JOYE NAME NAME STREET ADDRESS 34515 CEDARFIELD DR. STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP RIDGE MANOR FL TITLE ☐ Delete TITLE ☐ Change Addition NAME WINIARCYZK, RONALD F NAME STREET ADDRESS 350 BURBANK RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL ☐ Delete TITLE TITLE ☐ Change ☐ Addition FORSBERG, JAMES C NAME STREET ADDRESS 350 BURBANK RD STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP OLDSMAR FL TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE MEVERSON 4-2-01 813-855-2627