2005 LIMITED LIABILITY COMPANY

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Feb 09, 2005 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # L03000049767 02-09-2005 90154 027 ****50 00 J&M PIPING & WELDING, LLC Principal Place of Business Mailing Address 959 POINSETTIA DRIVE 959 POINSETTIA DRIVE 20008724 CHULUOTA, FL 32766 CHULUOTA, FL 32766 01212005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3594465 37-1480521 \$5.00 Additional Fee Required 6. Name and Address of Current Registered Agent JENSEN, JOSEPH JR. DO NOT WRITE 959 POINSETTIA DRIVE CHULUOTA, FL 32766 IN THIS SPACE 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 DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE JENSÉN, JOSEPH JR. NAME STREET ADDRESS 959 POINSETTIA DRIVE CITY-ST-ZIP CHULUOTA, FL 32766 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

DEEPK F. JEUSEN JA SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE