## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# L41608

Address:

City-St-Zip:

16816 WINDSOR PARK DRIVE

LUTZ, FL

Entity Name: CONSOLIDATED METALS OF FLORIDA, INC.

FILED Feb 27, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
% KASS, HODGES & MASSARI 2021 NO. 40TH STREET TAMPA, FL 33605			2021 NO. 40TH STF TAMPA, FL 33605	2021 NO. 40TH STREET TAMPA, FL 33605	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
% KASS, HODGES & MASSARI 2021 NO. 40TH STREET TAMPA, FL 33605			2021 NO. 40TH STREET TAMPA, FL 33605		
FEI Number:	: 59-1147488	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
2021 NO. 4 TAMPA, FI		- S	ourpose of changing its register	red office or registered agent, or both,	
SIGNATUR					
Electronic Signature of Registered Agent			ent	Date	
		o satisfy its Intangible Tax filing req g Trust Fund Contribution (  ).	uirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (X SOLOMON, LA 1505 N. FLOR TAMPA, FL	*	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PATIERNO MIC	) Delete CHAEL D, IGEWOOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	V ( ELLIS, CARLY	) Delete LE C	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MICHAEL D. PATIERNO P 02/27/2002