

2001 UNIFORM BUSINESS REPORT (UBR)

0028999 AF

DOCUMENT # M00000001164

1. Entity Name

TUBO-FGS, L.L.C.

FILED

01 FEB -2 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2835 HOLMES ROAD
HOUSTON TX 77051

Mailing Address

2835 HOLMES ROAD
HOUSTON TX 77051

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

74-2843661

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MANAGER
NAME John Lauletta
STREET ADDRESS 2835 Holmes Rd
CITY-ST-ZIP Houston TX 77051 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 500003657165--6 ☐ Change ☐ Addition

TITLE MANAGER
NAME Joe Winkler
STREET ADDRESS 2835 Holmes Rd
CITY-ST-ZIP Houston TX 77051 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP -02/08/01--0103-0103 ☐ Change ☐ Addition
*****50.00 *****50.00

TITLE MANAGER
NAME JAMES F. MARONEY III
STREET ADDRESS 2835 Holmes Rd
CITY-ST-ZIP Houston TX 77051 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 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.

SIGNATURE:

SIGNATURE REQUIRED

J. F. MARONEY, III
VICE PRESIDENT

01-16-01

713/799-5100

CR2E083 (11/00)