2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P00000011602 **DOCUMENT #**

1. Entity Name

NBS PERFORMANCE & FABRICATION, INC.



FILED Jan 24, 2003 8:00 am Secretary of State

01-24-2003 90039 040 ***150.00

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Steed Address (P.C. Box Number is Not Acceptable) City FL Zip Code	4				- <u>-</u>	N.	ame		<u> </u>								
Signature, hyperal or primate ranner of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. File NoW!!! FEE IS \$150.00		·=			Stre			Address (P.O. Box Number is Not Acceptable)									_
B. 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, how or present name of registered agent and she is applicable. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.	PINELLAS	PARK FL 3	3781			· [
SIGNATURE Signature Signature brains or printed name of registered agent and title it suprocable. (NOTE Pergisared Agent signature misulated when reindation) DATE						Ci	ity							FL	Zip Co	ode	
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12. Thereby 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		ortify that the	information supplies to 10	this filter	door not muchful.	┸		otion 1	110 07/01	WIN CIT	ride Ct	nt	1 6 41	NOT 02**	ify that the	informat	ion

reflect series that the information supplied with this limit does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Turther 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THE REQUIRED SENATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR