# UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 15, 2002 8:00 am**
**Secretary of State**
05-15-2002 90100 048 ***150.00

DOCUMENT # P00000061481

1. Entity Name
Structual Steel Services Inc.

**DO NOT WRITE IN THIS SPACE**

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| P.O. Box 377 | P.O. Box 377 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: Jensen Beach FL 34958 | City & State: Jensen Bch, FL 34958 |
| Zip: 34958 Country | Zip: 34958 Country |

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0702150-9 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name: Lisa Ross

Street Address (P.O. Box Number is Not Acceptable): 2300 Tilton Rd

City: Port St. Lucie FL Zip Code: 34952

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: X Lisa Ross — 12/13/02
Signature, type or printed name of [illegible] and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**January 1 - May 1 Fee is $150.00**
**After May 1, Fee is $550.00**
**Amended UBR is $61.25**
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE: Add President | |
| NAME: Lisa Ross | |
| STREET ADDRESS: 2300 Tilton Rd | |
| CITY-ST-ZIP: Pt. St Lucie, FL 34952 | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
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**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X Lisa Ross DATE 12/13/02