## A DOPPREFIT OF ORATION (UBR)

SIGNATURE:

DOCUMENT # PO 10000 52868 1. Entity Name FHED STEEL SYSTEMZ. NET, INC. 05 APR 28 PM 4: 05 DO NOT WRITE IN THIS SPACE DEUNCIARY UL STAT TALLAHASSEE, FLORIDA 2. Principal Place of Business 3. Mailing Address 1800 NW 34 ST Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State 65-1106872 33122-1141 Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE (P.O. Box Number is Not Acceptable) IN THIS SPACE 8. The above na red entity ayomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee Is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. アらてひ BILE TITLE CR2E034B (12/01 000054205340 05/10/05--01043--001 \*\*150.00 RICHARD B. SPINNENWEBEL NAME NAME 7800 NW 34 ST STE 203 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33122-1141 CITY-ST-ZIP NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-78P TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 appropriate 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 add