2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State
04-17-2002 90076 023 ***150.00

DOCUMENT # P01000119978

1. Entity Name
ALL STEEL BUILDINGS AND COMPONENTS, INC.

Principal Place of Business	Mailing Address
10159 U.S. HWY 41 SOUTH GIBSONTON FL 33534	10159 U.S . HWY 41 SOUTH GIBSONTON FL 33534

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
10159 US 41 S	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: GIBSONTON FL	City & State
Zip: 33534 Country: USA	Zip Country

4. FEI Number: 59-3761216 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RAMEY, BOBBY L 10159 U.S. HWY 41 SOUTH GIBSONTON FL 33534	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: X Bobby L Ramey BOBBY RAMEY 4.3.02
Signature, typed or printed name of registered agent 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) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RAMEY, BOBBY L 10159 U.S. HWY 41 SOUTH GIBSONTON FL 33534	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Bobby L Ramey Bobby Ramey 4.3.02 8136718044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #