2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100985

FILED Jul 01, 2009 Secretary of State

| Entity Nam | ne: SUCA | PIPE SUPPLY ONE, IN | C. | | | | - | |
|---|--|--|----------------------|---|---|---------------|-------------------------|--|
| Current Pr | incipal Pla | ace of Business: | | New Principal Place of Business: | | | | |
| 4910 LOWE TAMPA, FL | | 26 | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | | |
| 4910 LOWE TAMPA, FL | | 26 | | | | | | |
| FEI Number: | 26-3667556 | FEI Number Applied F | For () FEI Nu | mber Not Appl | icable () | Certificate | of Status Desired () | |
| Name and | Address o | of Current Registered A | Agent: | Name and Address of New Registered Agent: | | | | |
| MOREY, W 1424 ROYA LAKELAND | L FOREST | 「LOOP | | | | | | |
| The above in the State | | ty submits this statemer | nt for the purpose o | of changing it | ts registered | office or reg | istered agent, or both, | |
| SIGNATUR | | | | | | | | |
| | Elect | ronic Signature of Regis | tered Agent | | | Da | ate | |
| | | .193(2)(b), F.S., the corpora cing Trust Fund Contributio | | the prior notic | e. | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | | | |
| Title: Name: Address: City-St-Zip: | P MCINTYRE, 4910 LOWE TAMPA, FL | ELL ROAD | | Title: Name: Address: City-St-Zip: | P () MCINTYRE, A: 4910 LOWELL TAMPA, FL 33 | ROAD | Addition | |

Title: () Delete Title: (X) Change () Addition MCINTYRE, ASHLEY MCINTYRE, CHRISTY Name: Name: Address: 4910 LOWELL ROAD Address: 4910 LOWELL ROAD TAMPA, FL 336244326 TAMPA, FL 336244326 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition MCINTYRE, CHRISTY Name: Name: MCINTYRE, JERIS Address: 4910 LOWELL ROAD Address: 4910 LOWELL ROAD City-St-Zip: TAMPA, FL 336244326 City-St-Zip: TAMPA, FL 336244326

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: ASHLEY M MCINTYRE 07/01/2009