## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P29620**

1. Entity Name

PIPER INDUSTRIES OF TEXAS, INC.

	,					VI ST					
Principal Place of Business 7482 PRESIDENTS DRIVE ORLANDO FL 32809 US			Mailing Address 7482 PRESIDENTS DRIVE ORLANDO FL 32809 US					TAN AND THE HIN THE			
2. Principal P	Place of Busin	ess	3. Mailing Address					i ibatidat iin tinta latid diiin isan nam aram aram	HBH E181> 618	ii <b>9</b> 19() 1981	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				_	CHECK HERE IF MAKING CHANGES			
City & State			City & State				4.	75-1966915		olied For Applicable	
Zip	Country		Zip	Zip Coun		у	5.	5. Certificate of Status Desired   \$8.75 Addit Fee Required		tional	
	6. Name	and Address of Current	Registered	Registered Agent			7.	7. Name and Address of New Registered Agent			
						Name					
LEMUS, ANTONIO					-	Street Address (P.O. Box Number is Not Acceptable)					
108 MARCIA DRIVE											
ALTAMONTE SPRINGS FL 32714											
						City		FL	Zip Code		
	tions of regis	ered agent.						gent, or both, in the State of Florida. I am fan	iliar with, a	nd accept	
oral y tronic	Signature, typed	or printed name of registered agent	t and title if applica	able. (NOTE: R	Registered /	Agent signature req	uired when r	reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Financing Trust Fund Contribution.	Added	May Be to Fees	
10.		OFFICERS AND	DIRECTORS	3	11.		A[	DDITIONS/CHANGES TO OFFICERS AND D			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		HIRLEY SIDENTS DRIVE FL 32809		☐ Delete	TITLE NAME STREET CITY-S	r address St-zip			_ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		AUL P JR SIDENTS DRIVE D FL 32809		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP			] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		T ADDRESS ST-ZIP			] Change	Addition	
TITLE NAME STREET ADDRESS		- :		☐ Delete	TITLE NAME STREE	T ADDRESS			Change	Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE: 5

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME



Delete

اعامع

407 857-4514 Daytime Phone #

Change

☐ Addition

**FILED** 

Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90056 032 \*\*\*150.00

CR2E034 (10/02)