FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P29746** **(5)**

1. Corporation Name

PIPING DESIGN SERVICES, INC.

Principal Place of Business	Mailing Address
8925 STERLING SUITE 280 IRVING TX 75063	8925 STERLING SUITE 280 IRVING TX 75063

2. Principal Place of Business (21) — State, Apt. #, etc. (22) — City & State (23) — Zip (24) — County (25)

2a. Mailing Address (26) — State, Apt. #, etc. (27) — City & State (28) — Zip (29) — County (30)

3. Date Incorporated or Qualified: **06/12/1990**

3a. Date of Last Report: **04/24/1995**

4. FEI Number: **91-0996444** ☐ Applied For ☐ Not Applicable

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

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

8. Does corporation owe Florida intangible tax under s. 199.032, Florida Statutes? ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.1005 or 617.1905, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such changes were authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	JANES, ARTHUR R.	
STREET ADDRESS	1320 GREENWAY DR. #550	
CITY-ST-ZIP	IRVING TX	
TITLE	VTS	☐ DELETE
NAME	BAKER, L. ALLEN, JR.	
STREET ADDRESS	1320 GREENWAY DR. #550	
CITY-ST-ZIP	IRVING TX	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '96

51 TITLE	☐ Change	☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
55 TITLE	☐ Change	☐ Addition
56 NAME		
57 STREET ADDRESS		
58 CITY-ST-ZIP		
59 TITLE	☐ Change	☐ Addition
60 NAME		
61 STREET ADDRESS		
62 CITY-ST-ZIP		
63 TITLE	☐ Change	☐ Addition
64 NAME		
65 STREET ADDRESS		
66 CITY-ST-ZIP		
67 TITLE	☐ Change	☐ Addition
68 NAME		
69 STREET ADDRESS		
70 CITY-ST-ZIP		
71 TITLE	☐ Change	☐ Addition
72 NAME		
73 STREET ADDRESS		
74 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby 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 12 or Block 13 above, or on an attachment with an entry in Block 13.

SIGNATURE: L. Allen Baker, Jr. 4/12/96 (214) 550-1212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number