

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 8:00 am
Secretary of State

02-09-2001 90213 006 ***150.00

DOCUMENT # P32544

1. Entity Name

AMERICAN STEEL BUILDERS, INC.

Principal Place of Business

Mailing Address

INDIANAPOLIS, INDIANA
 INDIANAPOLIS IN 46256
 US

5425 POINDEXTER DR
 INDIANAPOLIS IN 46236-9040
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

5425 Poindexter Dr.

Suite, Apt. #, etc.

5425 Poindexter Dr.

City & State

City & State

Zip

46235

Country

Zip

46235

Country

4. FEI Number

35-1542128

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

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

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

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, 2001 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 P ☐ Delete
 NAME SLOAN, GARY
 STREET ADDRESS 5425 POINDEXTER DR
 CITY-ST-ZIP INDIANAPOLIS IN 46236

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP 46235

TITLE VTD ☐ Delete
 NAME COOK, THOMAS E
 STREET ADDRESS 5425 POINDEXTER DR
 CITY-ST-ZIP INDIANAPOLIS IN 46236

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP 46235

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME Dustin E. Sloan
 STREET ADDRESS 5425 Poindexter Dr.
 CITY-ST-ZIP Indianapolis, In 46235

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME Assistant Secretary
 STREET ADDRESS Debbie Kruse
 CITY-ST-ZIP 5425 Poindexter Drive
 Indianapolis, In 46235

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)