

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90071 001 ***750.00

DOCUMENT # P38894

1. Entity Name

PIPING COMPANIES, INC.

Principal Place of Business

**P.O. BOX 190
SAND SPRINGS OK 74063**

Mailing Address

**5151 SAN FELIPE
STE 1600
HOUSTON TX 77056**

22890



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **73-0619852**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.,
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

TITLE	P	<input type="checkbox"/> Delete
NAME	THOMAS, ALEX	
STREET ADDRESS	5151 SAN FELIPE STE 1600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	V	<input type="checkbox"/> Delete
NAME	PETERSON, TOM	
STREET ADDRESS	1160 VICKERY LANE	
CITY-ST-ZIP	CORDOVA TN 38018	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	SOULE, COLIN	
STREET ADDRESS	100 KING ST W	
CITY-ST-ZIP	HAMILTON, ONT, CANADA L8N- 4J6	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	RAMIREZ, MICHAEL W	
STREET ADDRESS	5151 SAN FELIPE STE 1600	
CITY-ST-ZIP	HOUSTON TX 77056	
TITLE	AS	<input checked="" type="checkbox"/> Delete
NAME	VENTRESCA, ANNA	
STREET ADDRESS	100 KING ST W	
CITY-ST-ZIP	HAMILTON, ONT, CANADA L8N- 4J6	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEBORAH HUSTON	
STREET ADDRESS	5151 SAN FELIPE, SUITE 1600	
CITY-ST-ZIP	HOUSTON, TX 77056	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Deborah S. Huston

1/9/2001

Date

7136257079

Daytime Phone #

0570167

CR2E034 (10/00)