

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90121 007 ***150.00

DOCUMENT # P95000000282

1. Entity Name
SOUTHERN VALVE & FITTING U.S.A., INC.

Principal Place of Business

261 NW 71ST STREET
MIAMI FL 33150

Mailing Address

261 NW 71ST STREET
MIAMI FL 33150

2. Principal Place of Business

261 NW 71 ST

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI

City & State

4. FEI Number

65-0546944

Applied For

Not Applicable

Zip

33150

Country

DAVE

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RICHARD, ROBERT W

1050 PENNSYLVANIA AVE #10
MIAMI BCH FL 33139

7. Name and Address of New Registered Agent

Name

RICHARD, Robert W

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

5940 12th Ave NW

City

Naples

FL

Zip Code

34119

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/12/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

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FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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
NAME
STREET ADDRESS
CITY-ST-ZIP

D
RICHARD, ROBERT W
261 NW 71 ST
MIAMI FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Robert W Richard
5940 12th Ave NW
NAPLES FL 34119

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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]
Robert W Richard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/12/01

Daytime Phone #

305-804-9009

CR2E034 (9/01)