

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000022148**

1. Entity Name

MALONE STEEL CORPORATION**FILED****Mar 09, 2001 8:00 am**
Secretary of State

03-09-2001 90491 031 ***150.00

Principal Place of Business

**10760 US 1 NORTH
ST. AUGUSTINE FL 32095**

Mailing Address

**10760 US 1 NORTH
ST. AUGUSTINE FL 32095**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number ~~50-3200291~~
59-3503036

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

**MALONE, JAMES C
10760 US 1 NORTH
ST. AUGUSTINE FL 32095**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
MALONE, JAMES C
10760 US 1 NORTH
ST. AUGUSTINE FL 32095** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPTD
MALONE, JEFF
10760 US 1 NORTH
ST. AUGUSTINE FL 32095** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-01

Date

904-808-4757

Daytime Phone #

CR2E034 (10/00)

DUVAL
(904) 642-5136
ST. JOHNS
(904) 808-4757
(904) 808-4714 FAX

Attachment
928920
MALONE # *P97000022148* REBAR &
STEEL
CORPORATION

ACCESSORIES

10760 U.S. 1 NORTH, ST. AUGUSTINE, FLORIDA 32095

November 3, 1998

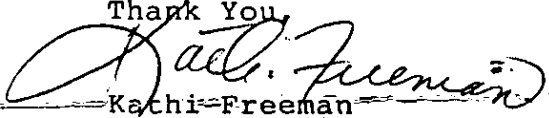
Florida Department Of State
Division Of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Document P97000022148

Dear Sir or Madame,

The FEIN/SSN for Malone Steel Corporation is 3503036, not 3200231 as when the business was a sole proprietorship. This number is listed with the Florida Department of Revenue. The sales tax number is 65-00-021554-38-4. Please check your information and adjust accordingly. Please call if you have any questions.

Thank You,


Kachi Freeman
Office Manager