FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000034220 (8)

PROCESS PIPING-USA CORP.

FILED Jan 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							•				[1] #1#14 11#3# 11#	lii Buli Iddi	
18121 PATTERSON ROAD 18121 PATTERSON ROAD					ND								
ODESSA FL 33556				ODESSA FL 33556					DÓ NOT WRÍ	TE IN THIS	SPACE		
								H	3. Date Incorporated or Qualified		3FAUL		
									04/16/1997				
2. Principal Place of Business			2a.	2a. Mailing Address					4. FEI Number		Ar	oplied For	
21			26	26					59-3460802		No	ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
22			27						U. Commodic of Clares Bearing			equired	
City & State			-	City & State					6. Election Campaign Financing			Мау Ве	
Zip	Country			Zip Country					Trust Fund Contribution			to Fees	
24	25			29 30					8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.				
	9. Name and Address of Current								10. Name and Address of New F			<u></u>	
НА	RMON, TH	OMAS				81	Name						
18121 PATTERSON ROAD							Stroot	Address (P.O. Box Number is Not Acceptable)					
ODESSA FL 33556							Ollect	Audies	(1.0. Dox redifiber is not Accept				
						83			. 12 6 40150000				
						84	City			FL	. `	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 change was 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, Florida Statutes.													
SIGNATURE													
Signature: typed or printed name of registered agent and title if applicable (NOTE, R 12. OFFICERS AND DIRECTORS						tegistered Agant signature requi		e required w	- · · · · · · · · · · · · · · · · · · ·	DATE			
TITLE	OFFICERS AND I		טוחבט	DELETE	_	1.1 TITLE		ΓP	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition	
NAME		•							omas Harmon		Grange		
STREET ADDRESS									121 Patterson R	n=3		ļ	
CITY - ST - ZIP					1,4 C/TY-S			,	essa FL 33556	Jua			
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STREET ADDRESS				2.3		2.3 STREET ADDRESS							
CITY-ST-ZIP						2. 4 CITY - ST - ZIP							
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NAME				3.2 N		3.2 NAME							
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TITLE				_			4.1 TITLE				Change	☐ Addition	
NAME						4. 2 NAME						Ì	
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NAME				1		5.2 NAME							
STREET ADDRESS				1		5.3 STREET ADDRESS							
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NAME					6.2 NA		4 DDD ***					}	
STREET ADDRESS							ADDRESS					İ	
14. I hereby o	certify that the	e information supplied	with this fil	ing does not qualify t	or the exe			d in Sec	tion 119.07(3)(i). Florida Statutes.	I further or	ertify that the	information	

Indicated on this annual report or supplemental annual 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 if changed, or on an attachment with an address.

1/20%

(813) 920-8344