2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S23528

City-St-Zip:

PRINCETON, NJ

Entity Name: REBAR SYSTEMS SERVICE, INC.

FILED Apr 23, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 141 SCHOOL ST 130 PINEY ROAD COTUIT, MA 02635 US US COTUIT, MA 02635 **Current Mailing Address: New Mailing Address: BOX 2046 BOX 2046** 130 PINEY ROAD 141 SCHOOL ST COTUIT, MA 02635 US COTUIT, MA 02635 US FEI Number: 04-2776696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOODMAN, KENNETH D. 3838 TAMIÁMI TRAIL N STE 300 NAPLES, FL 34103 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete (X) Change () Addition Title: WHRITENOUR, PHILLIP, A. WHRITENOUR, PHILLIP, A. Name: Name: 130 PINEY ROAD 141 SCHOOL ST Address: Address: City-St-Zip: COTUIT, MA City-St-Zip: COTUIT, MA Title: DVT Title: () Change () Addition () Delete Name: BLACK, PETER. Name: 439 TERHUNE ROAD Address: Address: PRINCETON, NEW JER., City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition WHRITNEOUR, BETTY LO, U Name: WHRITNEOUR, BETTY LO, U Name: 141 SCHOOL ST 130 PINEY ROAD Address: Address: City-St-Zip: COTUIT, MA City-St-Zip: COTUIT, MA Title: () Delete Title: () Change () Addition BLACK, PETRE Name: Name: Address: 439 TERHUNE ROAD Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: PHILLIP A. WHRITENOUR D 04/23/2002