FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 MAY -1 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V15243** **(1)**

1. Corporation Name

PETROLEUM SPECIALTIES FABRICATION CORPORATION

Principal Place of Business	Mailing Address
P.O. BOX 547818 ORLANDO FL 32808 US	P.O. BOX 547818 ORLANDO FL 32808 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/17/1992
3a. Date of Last Report: 07/26/1994

2. Principal Place of Business
21: P.O. Box 547818
Suite, Apt. #, etc. 22:
City & State 23: ORLANDO, FL
Zip 24: 32854 Country 25: ORANGE

2a. Mailing Address
26: P.O. Box 547818
Suite, Apt. #, etc. 27:
City & State 28: ORLANDO, FL
Zip 29: 32854 Country 30: ORANGE

4. FEI Number: 59-3104996 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LANDIS, DAVID M.
28 EAST WASHINGTON STREET
ORLANDO FL 32802-2209

10. Name and Address of New Registered Agent

91 Name: ARUL MANOHARAN
92 Street Address (P.O. Box Number is Not Acceptable): 2813 SILVER STAR ROAD
93:
94 City: ORLANDO FL 95 Zip Code: 32804

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: ARUL MANOHARAN, CFO — 04-25-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☑ Change ☐ Addition
NAME	REISELT, RICHARD	1.2 NAME	REISELT, RICHARD
STREET ADDRESS	1960 BRENGLE AVE.	1.3 STREET ADDRESS	2818 SILVER STAR ROAD
CITY-ST-ZIP	ORLANDO FL 32808	1.4 CITY-ST-ZIP	ORLANDO, FL 32804
TITLE	D	2.1 TITLE	D ☑ Change ☐ Addition
NAME	MANOHARAN, ARUL	2.2 NAME	MANOHARAN, ARUL
STREET ADDRESS	1960 BRENGLE AVE.	2.3 STREET ADDRESS	2818 SILVER STAR ROAD
CITY-ST-ZIP	ORLANDO FL 32808	2.4 CITY-ST-ZIP	ORLANDO, FL 32804
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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.

SIGNATURE: ARUL MANOHARAN 04-25-95 407-299-9044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0066466 CP