2001 UNIFORM BUSINESS REPORT #BR) DOCUMENT # P00000021550 FILED 1. Entity Name ELRETARY OF STATE TUREK CONSULTING SERVICES, INC. 01-23-2001 90049 037 ***158.75 OLAPR 30 PM 3:44 Principal Place of Business Mailing Address 8041 NW 46TH COURT BO41 NW 45TH COURT LAUDERHILL FL 33351 LAUDERHILL FL 33351 2. Principal Place of Business 3. Mailing Address 3188 NW 118 LANE 3188 NM (18 TANE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State CORAL SPRINGS CORAL SPRINGS. 65-0986008 Not Applicable Zio \$8.75 Additional 5. Certificate of Status Desired 33065-3149 US 33065-314 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TOTAL CONTRACTOR OF CONTRACTOR LEVINE & SEGAUL, P.A. Street Address (P.O. Box Number is Not Acceptable) 4300 N UNIVERSITY DRIVE SUITE A-106 FORT LAUDERDALE FL 33351 3188 NM 118 TYNE Zip Code COPALSPRINGS 33065-3149 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 DONALD J. TUREK, -PRESIDENT TUREK CONSULTING SUCS INC. SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 . Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PD TITLE Change TITLE . Dalete TUREK, DOWNED J NAME TUREK, DÖNALD J NAME 3188 NW 118 LANE STREET ADDRESS STREET ADDRESS 8041 NW 48TH COURT CORAL & PRINGS, FL 33065-3149 CITY-ST-ZIP CITY-ST-ZIP Lauderhill fl 33351 Change Addition SD Deleta TITLE 5D TITLE TUREK, MARIA TUREK, MARIA NAME NAME 3188 NM 118 TANE STREET ADDRESS 8041 NW 46TH COURT STREET ADORESS CITY-ST-ZIP CORALSPRINGS, FL 33065-3149 CITY-SI-7P LAUDERHILL FL 33351 Addition Change TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition | TITLE TITLE ☐ Delcte NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZP ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stelled 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. DOUALD J. TUREK

SIGNATURE: