Officer/Director Detail : T:41

Electronic Signature of Registered Agent

Title	PS	Title	VT
Name	ADAMS, BRUCE H	Name	ADAMS, SHIRLEY LMD
Address	PO BOX 152671	Address	PO BOX 152671
City-State-Zip:	TAMPA FL 33684-2671	City-State-Zip:	TAMPA FL 33684-2671

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.

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 149954

Entity Name: H.B. ADAMS, INC.

Current Principal Place of Business:

3903 NORTHDALE BLVD 100E TAMPA, FL 33624

Current Mailing Address:

3701 W SWANN AVE TAMPA, FL 33609 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

MALHOTRA, CYRUS 3903 NORTHDALE BLVD 100E TAMPA, FL 33684-2671 US

SIGNATURE:

I hereby 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 all other like empowered.

PS

SIGNATURE: BRUCE ADAMS

Electronic Signature of Signing Officer/Director Detail

FILED Apr 29, 2022 Secretary of State 4599677727CC

Certificate of Status Desired: No

04/29/2022

Date