| FEI Number: 59-2249307<br>Name and Address of Current Registered Agent:  |  |                 | Certificate of Status Desired: No |            |
|--|--|-----------------|-----------------------------------|------------|
| WEEKES, GREGORY<br>3600 23 AVE SOUTH<br>LAKE WORTH, FL 33461 US  |  |                 |                                   |            |
| 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  | GREGORY WEEKES                           |                 |                                   | 01/09/2017 |
|  | Electronic Signature of Registered Agent |                 |                                   | Date       |
| Officer/Director Detail :  |  |                 |                                   |            |
| Title  | VD                                       | Title           | PD                                |            |
| Name   | WEEKES, GREG                             | Name            | WALSH, SUSAN                      |            |
| Address  | 3600 23 AVE SOUTH                        | Address         | 3600 23 AVE SOUTH                 |            |
| City-State-Zip:  | LAKE WORTH FL 33461                      | City-State-Zip: | LAKE WORTH FL 33461               |            |
| Title  | SD                                       |                 |                                   |            |
| Name   | WEEKES, GREGORY                          |                 |                                   |            |
| Address  | 3600 23 AVE SOUTH                        |                 |                                   |            |
| City-State-Zip:  | LAKE WORTH FL 33461                      |                 |                                   |            |

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.

SIGNATURE: GREGORY WEEKES

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# G12470

Entity Name: EASTERN METAL SUPPLY, INC.

#### **Current Principal Place of Business:**

3600 23 AVE SOUTH LAKE WORTH, FL 33461

#### **Current Mailing Address:**

3600 23 AVE SOUTH LAKE WORTH. FL 33461

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# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 09, 2017 **Secretary of State** CC5682805270

01/09/2017

VICE PRESIDENT

Date