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2001 UNIFORM BUSINESS REPORT (UBR)

Apr 05, 2001 8:00 am Secretary of State **DOCUMENT # 291147** HEAVY LIFT SERVICES, INC. 04-05-2001 90019 017 ***150.00 Principal Place of Business Mailing Address 155 E. PORT ROAD P.O. BOX 9319 WHS. B RIVIERA BCH FL 33419 RIVIERA BEACH FL 33404 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 59-1097869 Not Applicable Zip Country Country \$8.75 Additional 5.1 Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIAS, ROBERT A. DIAS, ROBERT A Street Address (P.O. Box Number is Not Acceptable) 18757 STILL LAKE DRIVE 19010 LOXAHATCHEE RIV RD JUPITER FL 33458 Zip Code City JUPITER 33458 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. ****ADDRESS CHANGE ONLY***** SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 PD CR2E034 (10/00) TITLE ☐ Delete XX Change ROBERT A DIAS, ROBERT A NAME NAME STREET ADDRESS 19010 LOXAHATCHEE RIV RD STREET ADDRESS 18757 STILL LAKE DRIVE CITY-ST-ZIP JUPITER, FL 00000 CITY-ST-ZIP JUPITER, FL 33458 TITLE ☐ Delete TITLE ☐ Change ☐ Addition COLLIER, ROLAND H NAME NAME STREET ADDRESS STREET ADDRESS 5904 SW WOODHAM ST CITY-ST-ZIP CITY-ST-ZIP PALM CITY FL VD TITLE ٧D ☐ Delete XX Change ☐ Addition DIAS, GLEN A DIAS, GLEN A. NAME NAME STREET ADDRESS 16295 134TH TERRACE N. STREET ADDRESS 18863 N. GOLDEN HAWK TRAIL CITY-ST-ZIP CITY-ST-ZIP jupiter fl JUPITER, FL 33458 TITLE XX Delete TITLE ☐ Change XX Addition ALEXANDER, PAMELA A DIAS, TINA M. NAME NAME STREET ADDRESS 147 SUN LANE STREET ADDRESS 18863 N. GOLDEN HAWK TRAIL CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY BEACH FL 32413 JUPITER, FL 33458 TITLE □ Delete TIME Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition Change NAME NAME

13. I hereby certify that the information supplied with this filling does not qualify 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 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 another 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 another 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 of the corporation o

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TINA M. DIAS