FILED
Mar 31, 2003 8:00 am
Secretary of State
03-31-2003 90221 010 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

80066791

DOCUMENT # 498211

1. Entity Name
COUNTY PLASTERING, INCORPORATED

Principal Place of Business	Mailing Address
231 S. E. MONTEREY AVENUE P. O. BOX 2696 STUART, FL 34996-1306	231 S. E. MONTEREY AVENUE P. O. BOX 2696 STUART, FL 34996-1306

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
231 SE Monterey Ave	231 S.E. Monterey Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Stuart, Fl.	City & State: Stuart, Fl.
Zip: 34996 Country: USA	Zip: 34996 Country: USA

4. FEI Number: 59-1751922 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RIZZOTTO, SALVATORE 231 S.E. MONTEREY AVE. STUART, FL	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jean Rizzotto JEAN Rizzotto 3/15/03
(Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RIZZOTTO, SALVATORE 231 S.E. MONTEREY AVE STUART, FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD RIZZOTTO, JEAN 231 SE MONTEREY AVE STUART, FL 34996	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jean Rizzotto JEAN Rizzotto 3/14/03 772-263-3961
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #