2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE!

Feb 14, 2000 8:00 am Secretary of State DOCUMENT # 509620 MASSEL CONSTRUCTION, INC. 02-14-2000 90183 024 ***150.00 Principal Place of Business Mailing Address 528 CORBIN PARK ROAD 528 CORBIN PARK ROAD **LUU44441** NEW SMYRNA BEACH FL 32168-8418 NEW SMYRNA BEACH FL 32168 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1685309 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MASSEL, EDWARD Street Address (P.O. Box Number is Not Acceptable) **528 CORBIN PARK ROAD NEW SMYRNA BEACH FL 32168** City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 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, 2000 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. Change ☐ Addition ☐ Delete TITLE MASSEL, EDWARD NAME NAME STREET ADDRESS STREET ADDRESS **528 CORBIN PARK ROAD** CITY-ST-ZIP CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168** ☐ Addition Change ☐ Delete TITLE TITLE MASSEL, BERNICE NAME NAME STREET ADDRESS STREET ADDRESS **528 CORBIN PARK ROAD** CITY-ST-ZIP CITY-ST-ZIF **NEW SMYRNA BEACH FL 32168** - 🖛 🖛 🗔 : Delete TITLE ___ Change ☐ Addition TITLE MASSEL, JEANNE NAME NAME STREET ADDRESS STREET ADDRESS **528 CORBIN PARK ROAD** CITY-ST-ZIP CITY-ST-ZIP NEW SMYRNA BEACH FL 32168 Delete TITLE Change Addition TITLE NAME MASSEL, LAURA L NAME STREET ADDRESS STREET ADDRESS **528 CORBIN PARK ROAD** CITY-ST-ZIP CITY-ST-ZIF **NEW SMYRNA BEACH FL 32168** Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-718 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME? STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Feb 10-2000