2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 656187 Mar 23, 2000 8:00 am 1. Entity Name INTERNATIONAL TECHNOLOGY & CONSTRUCTION CO., INC **Secretary of State** 03-23-2000 90015 009 ***150.00 Mailing Address Principal Place of Business 3210 SYDNEY ROAD 3210 SYDNEY ROAD PO BOX 458 PO BOX 458 PLANT CITY FL 33564-0458 PLANT CITY FL 33564 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1957342 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent Name LEWIS, JOHN T Street Address (P.O. Box Number is Not Acceptable) 3210 SYDNEY RD. PLANT CITY FL 33567 Zip Code City FI 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be - 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 11. OFFICERS AND DIRECTORS 12. PD TITLE Change ☐ Addition TITLE ☐ Delete LEWIS, JOHN T NAME NAME STREET ADDRESS 3210 SYDNEY RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE LEWIS, RAYMOND R. NAME NAME 3210 SYDNEY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY FL CITY-ST-ZIP Addition ☐ Delete Change TITI F HARRELL, DEAN NAME STREET ADDRESS 3210 SYDNEY RD_ STREET ADDRESS CITY-ST-ZIP PLANT CITY FL CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE HORN, DAVID NAME NAME 3210 SYDNEY RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF PLANT CITY FL TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition . Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS 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

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

SIGNATURE: John T. Lewis 1-06-2000 \$13-252-854.

SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone \$