2002 UNIFORM BUSINESS REPORT (UBR)

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SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Mar 26, 2002 8:00 am DOCUMENT # 656187 Secretary of State 1. Entity Name 03-26-2002 90015 030 ***150.00 INTERNATIONAL TECHNOLOGY & CONSTRUCTION CO., INC. Principal Place of Business Mailing Address 3210 SYDNEY ROAD 3210 SYDNEY ROAD HUUDUDAL PO BOX 458 PO BOX 458 PLANT CITY FL 33564 PLANT CITY FL 33564 2. Principal Place of Business 3. Mailing Address PID. BOX 458 912 E. Cherry ST. Suite, Apt. #, etc. Suite, Apt. #, etc. / -DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1957342 PONT CITY FIRRIDA YDNT CH Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired П Hitsbargh US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEWIS, JOHN T Street Address (P.O. Box Number is Not Acceptable) 412 E. Cherry ST 3210 SYDNEY RD. PLANT CITY FL 33567 Zip Code 33566 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. (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, 2002 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 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change TITLE ☐ Delete TITLE ☐ Addition 412 E. Cherry ST NAME LEWIS, JOHN T NAME STREET ADDRESS 3210 SYDNEY RD STREET ADDRESS PIANT CITY, F1 33566 CITY-ST-ZIP PLANT CITY FL CITY-ST-ZIP VΡ ☐ Delete TITLE Change 412 E. CherryST NAME LEWIS, RAYMOND R. NAME STREET ADDRESS STREET ADDRESS 3210 SYDNEY RD PIANT City, FI 33566 CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL ☐ Addition TITLE ☐ Delete TITLE 412 E. cherry ST PIANT City, F/ 33566 Change NAME NAME HARRELL, DEAN STREET ADDRESS STREET ADDRESS 3210 SYDNEY RD CITY-ST-7IP CITY-ST-ZIP PLANT CITY FL TITLE SD □ Delete TITLE 4+2-E-cherry ST NAME HORN, DAVID NAME STREET ADDRESS STREET ADDRESS 3210 SYDNEY RD CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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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