FILE NOW: FILING FEE AFTER MAY 1ST. IS \$550.00 **FILED** PROFIT , FLORIDA DEPARTMENT OF STATE May 18 1998 8:00am CORPORATION ' Sandra B.: Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 854838 (0)POLIVKA PAVING, INC. DBA PONKA Principal Place of Business Mailing Address 40.00x 00x 1544 N. MAIU St 1544 N. MAIN STREET Wiles OH 4446 NILES OH 44446 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/02/1982 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 34-1053258 21 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ADAMS, LESUE 725 LALLY ROCK CT. Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32825 83 84 Zip Code City R5 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Addition DELETE 1 1 THLE Change TITLE POLIVKA, BASIL A. 1.2 NAME NAME 1849 NILES-CORTLAND RD. STREET ADDRESS 13 STREET ADDRESS WARREN OH 44484 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 21 TITLE Change Addition TITLE POLIVKA, ANDREW B 22 NAME NAME 2871-DEER TRAIL 105 Lexie Lave 2.3 STREET ADDRESS STREET ADDRESS HULES OH-HHHB Wasser, OH 44484 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change 3.1 THE ☐ Add-tion TITLE POLIVKA, BONINIE S. 3.2 NAME NAME 1849 NILES-CORTLAND RD. 3.3 STREET ADDRESS STREET ADDRESS WARREN OH 44484 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TILLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Add₁tion 5.1 TOLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CI Y-ST-ZIP DELETE Change Add:tion 61 THLE TITLE 62 NAME NAME

6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does by qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplementation 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 proporation or the receiver or trusted by owered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 THE TOTAL

STREET ADDRESS

Block 12 or Block

01-29-98 330-505-0419