2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 11, 2000 8:00 am Secretary of State DOCUMENT # F9400002632 DEMARCO DESIGN SERVICE, INC. 05-11-2000 90322 013 ***150.00 Principal Place of Business Mailing Address 9 CAROL CT. 9 CAROL CT. PALM COAST FL 32137-8122 PALM COAST FL 32137 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 22-1869617 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DEMARCO, SALVATORE P. Street Address (P.O. Box Number is Not Acceptable) 9 CAROL CT. PALM COAST FL 32137 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 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. Сhange ☐ Addition CR2E034 (9/99) ☐ Delete Ţ!ŤLĒ TITLE NAME DEMARCO, SALVATORE R NAME STREET ADDRESS STREET ADDRESS 9 CAROL CT. CITY-ST-ZIP CITY-ST-ZIP PALM COAST FL 32137 ☐ Addition Delete Change TITLE NAME STREET ADDRESS STREET ADDRESS C/TY+ST+ZIP CITY-ST-ZIF ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ De ete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-718 CITY-ST-ZIP Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-78 CITY-ST-ZIP ☐ Change □ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P 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 supplimental peport is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received to the true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received true true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the received true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director or the corporation or the received true and accurate and that my signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made under cath is a signature shall have the same legal effect as if made

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #