2006 FOR PROFIT CORPORATION

Feb 13, 2006 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # H28892 02-13-2006 90003 019 ***150.00 1. Entity Name PROFESSIONAL BUILDERS OF AMERICA, INC. Principal Place of Business Mailing Address P.O. BOX 67407 P.O. BOX 67407 60014316 ST PETERSBURG, FL 33736-7407 US ST PETERSBURG, FL 33736-7407 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. 01232006 CR2E034 (11/05) Chg-P 4. FEI Number Applied For 59-2467626 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ZULLI, RAYMOND Street Address (P.O. Box Number is NovAcceptable) 6600 SUNSET WAY #207 ST. PETE BCH., FL 33706 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. I am familia Signature, typed or printed name of registered agent and title (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VDT Change TITLE ☐ Delete TITLE ZULLI, RAYMOND NAME NAME 11515 Splendid Lane Tampa, FL 33626 6600 SUNSET WAY #207 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETE BCH, FL 33706 CITY-ST-ZIP WILE ☐ Delete TITLE Change ☐ Addition NAME ZULLI, BARBARA H NAME 11515 Splendid Lane Tampa, FL 331026 STREET ADDRESS 6600 SUNSET WAY #207 STREET ADDRESS CITY-ST-ZIP ST PETE BCH, FL 33706 CITY-ST-ZIP ☐ Change THILE Delcte TITLE Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition 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-7/P CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED

ATTACHMENT LOUITSIC

PROFESSIONAL BUILDERS OF AMERICA, INC.

11515 SPLENDID LANE
TAMPA, FLORIDA 33626
(813) 926-1232FAX # (813) 792-0255
STATE OF FLORIDA GENERAL
CONTRACTORS' LICENSE # CGC 016952

FOR YOUR RECORDS, PLEASE MAKE THE FOLLOWING CHANGES AS OF NOVEMBER 01, 2005

PROFESSIONAL BUILDERS 11515 SPLENDID LANE TAMPA, FLORIDA 33626 OFFICE # (813) 925-1232 FAX # (813) 792-0255