2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

Aug 21, 2001 8:00 am Secretary of State **DOCUMENT #** H60605 1. Entity Name SUPER SEAL PAVING, INC. 08-21-2001 90009 023 ***150.00 Principal Place of Business Mailing Address % PHILLIP FAAS % PHILLIP FAAS **LUU/0428** 3134 BAYSHORE BLVD., N.E. 3134 BAYSHORE BLVD., N.E. ST. PETERSBURG FL 33703-5504 ST. PETERSBURG FL 33703-5504 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2701842 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required ---6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FAAS, PHILLIP Street Address (P.O. Box Number is Not Acceptable) 3134 BAYSHORE BLVD., N.E. ST. PETERSBURG FL 33703 , Citý Zip Code 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) DATE FILE NOW!!! FEE IS \$550.00 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 September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition FAAS, PHILLIP NAME NAME STREET ADDRESS 3134 BAYSHORE BLVD. N.E. STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZIP 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-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI E ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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