FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED PROFIT Jan 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # H62304 (1) PJ'S MAINTENANCE SPECIALISTS. INC. Principal Place of Business Mailing Address 1618 TWELVE OAKS WAY P.O. BOX 14158 W. PALM BCH FL 33408 N. PALM BCH, FL 33408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/17/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2556874 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Yes □ No 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WHITIS, PHILIP A 1618 TWELVE OAKS WAY 82 Street Address (P.O. Box Number is Not Acceptable) #102 83 N. PALM BCH. FL 33408 84 City Zip Code 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 the if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition WHITIS, PHILIP A. NAME 1.2 NAME 1618 TWELVE OAKS WAY, #102 STREET ADDRESS 1.3 STREET ADDRESS N. PALM BEACH FL 33408 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition WHITIS, JANICE M. NAME 2.2 NAME 1618 TWELVE OAKS WAY, #102 STREET ADDRESS 2.3 STREET ADDRESS N. PALM BEACH FL 33408 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE ☐ Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing closs not 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIE

TITLE

NAME

Change

Addition