2000 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

Jan 31, 2000 8:00 am Secretary of State **DOCUMENT # J15117** ADMIRAL'S COVE CONSTRUCTION CO., INC. 01-31-2000 90095 048 ***150.00 Principal Place of Business Mailing Address 200 ADMIRALS COVE BLVD. 200 ADMIRALS COVE BLVD. JUPITER FL 33477-4046 JUPITER FL 33477 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 58-1682572 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HYMAN, SHERRY LEFKOWI Street Address (P.O. Box Number is Not Acceptable) 200 ADMIRALS COVE BLVD JUPITER FL 33477 City 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 (NOTE: Registered Agent signature required when reinstating) DATE 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition TITLE ☐ Delete TITLE FRANKEL, THOMAS NAME NAME 200 ADMIRALS COVE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Change Addition ☐ Delete TITLE TITLE FRANKEL, BENJAMIN NAME NAME 200 ADMIRALS COVE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JUPITER FL ☐ Change STD ☐ Delete ☐ Addition TITLE TITLE FRANKEL, WILLIAM NAME NAME 200 ADMIRALS COVE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP JUPITER FL ☐ Change ☐ Addition AS ☐ Delete TITLE TITLE FRANKEL, THOMAS NAME NAME STREET ADDRESS 200 ADMIRALS COVE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Change ☐ Addition ۷P ☐ Delete TITLE TITLE MAKRANSKY, JACK NAME NAME 200 ADMIRALS COVE BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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

FILED

Thomas Frankel, President 561-744-1033 1/13/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daylane Phone #