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FLORIDA DEPARTMENT OF STATE Jan 27 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K16226 (8) FINE LINE CONSTRUCTION & ELECTRIC, INC. Principal Place of Business Mailing Address P.O. BOX 1452 P.O. BOX 1452 **BOCA RATON FL 33429** BOCA RATON FL 33429 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/23/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 231 Goolsby 65-0033228 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HUMMEL, JOSEPH D. VOSEPH 3100 MILLWOOD TR M106 82 O. Box Number is Not Acceptable) 2471 **BOCA RATON FL 33431** 83 33064 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 little if applicable (NOTE, Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1,1 TITLE Change TITLE HUMMEL, JOSEPH 1.2 NAME NAME CR2E034 3841 N.E. 24TH AVE 1.3 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 1.4 CITY - ST - ZIP CITY - ST - ZIP __ DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE ☐ Change Addition TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY - ST - ZIP 6.4 CITY - ST-ZIP 14. I hereby certify that the information supplied with the lifting does 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 arrival 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 received trastee 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.

IRE REQUIRED

SIGNATURE:

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