FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 04 1996 8:00 am
Secretary of State

DOCUMENT # **L01249** **(6)**

1. Corporation Name

PLUMB, LEVEL & SQUARE, INC.

Principal Place of Business	Mailing Address
2700 N. 29TH AVENUE SUITE #111 HOLLYWOOD FL 33020	2700 N. 29TH AVENUE SUITE #111 HOLLYWOOD FL 33020

3. Date Incorporated or Qualified: 07/10/1989
3a. Date of Last Report: 04/25/1995

2. Principal Place of Business
21: 1791 BLOUNT R.d.
22 Suite, Apt. #, etc.: 211
23 City & State: POMPANO Bch, FL.
24 Zip: 33069 25 Country: USA

2a. Mailing Address
26: 1791 BLOUNT Rd.
27 Suite, Apt. #, etc.: 211
28 City & State: POMPANO Bch, FL.
29 Zip: 33069 30 Country: USA

4. FEI Number: 65-0128677 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MARTIN, KEVIN
2700 N. 29TH AVENUE
SUITE 111
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name: KEVIN MARTIN
82 Street Address (P.O. Box Number is Not Acceptable): 1791 BLOUNT Rd # 211
83:
84 City: POMPANO Bch FL 85 Zip Code: 33069

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.

1 SIGNATURE: _____ DATE: 1.15.96
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE		☑ Change ☐ Addition
NAME	MARTIN, KEVIN		1.2 NAME		
STREET ADDRESS	1210 SE 5TH ST.		1.3 STREET ADDRESS	1791 Blount Rd #211	
CITY-ST-ZIP	DEERFIELD BEACH FL		1.4 CITY-ST-ZIP	POMPANO Bch, FL. 33069	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	700001773798	☐ Change ☐ Addition
NAME			5.2 NAME	-04/09/96--01063--029	
STREET ADDRESS			5.3 STREET ADDRESS	***200.00	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

4/8/96 JR

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 3/21/96 954-968-1601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #