FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT FLORIDA DEPARTMENT OF STATE Apr 13, 1999 8:00 am CORPORATION Katherine Harris ANNUAL REPORT Secretary of State Secretary of State 1999 DIVISION OF CORPORATIONS 04-13-1999 90010 019 ***150.00 DOCUMENT # L10575 Construction Products International N/C 3/23/99 Export, Inc Principal Place of Business Mailing Address 2110 S. Oceanside Hux Suite H DO NOT WRITE IN THIS SPACE Oceanside, CA 92054 3. Date Incorporated or Qualifed 08-22-89. 2. Principal Place of Busines 2a. Mailing Address 4. FEI Number Applied For 11613-1247 Ave. NE 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes the current year Intangible ΧĺΝο USA Personal Property Tax. ☐ Yes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Tori Morgan 417, Whooping 82 Street Address (P.O. Box Number is Not Acceptable) 83 Altamonte Springs, FL City Zip Code 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 ap (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. President W. Kirkpatrict DELETE res Dic TITLE 1.1 TITLE 1.2 NAME NAME 6-738 1.3 STREET ADDRESS STREET ADDRESS Kirkland, WA 98034 CITY-ST-ZIP 1.4 CITY-ST-ZIP Secretary / Treasurer Don Bergman 3070 Quail Run Dr. ☐ Change 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS Kelowna, B.C. Canada VI) 137 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE . ☐ Change ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF □ DELETE 5.1 TITLE Change ☐ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 61 TITLE ☐ Addition ☐ Change TITLE

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12.

NAME

STREET ADDRESS

CITY-ST-ZIP

14. 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FR W. Tutt KEVIN W. KIRKANTRICK
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: