2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L27555

Entity Name: GROUNDTEK OF CENTRAL FLORIDA, INC.

FILED Jun 18, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

862 MAGUIRE RD OCOEE, FL 34761 US

Current Mailing Address: New Mailing Address:

862 MAGUIRE RD OCOEE, FL 34761 US

FEI Number: 59-2981065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PELEGRIN, BORI M
2611 CHELSEA ST
ORLANDO, FL 32803 US

BORI, GEORGE L SR.
1515 BLACKWOOD AVENUE
GOTHA, FL 34734 US

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: GEORGE BORI 06/18/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: PELEGRIN, BORI M Name: BORI, GEORGE L SR.
Address: 2611 CHELSEA ST. Address: 1515 BLACKWOOD AVENUE

 Address:
 2611 CHELSEA ST
 Address:
 1515 BLACKWOOD AVENUE

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 GOTHA, FL 34734

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 BORI, HOLLY
 Name:
 MICHAUD, GENETTE L

 Address:
 2449 CLIFF DALE ST
 Address:
 1515 BLACKWOOD AVENUE

City-St-Zip: OCOEE, FL 34761 City-St-Zip: GOTHA, FL 34734

 $\label{eq:total_control_control_control} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

 Name:
 BORI, HECTOR
 Name:
 BORI, GEORGE L JR.

 Address:
 2449 CLIFF DALE ST
 Address:
 30 DESIREE AURORA STREET

City-St-Zip: OCOEE, FL 34761 City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Delete Title: S (X) Change () Addition

Name: BORI, HOLLY Name: MICHAUD, GENETTE L
Address: 2449 CLIFFDALE ST Address: 1515 BLACKWOOD AVENUE

City-St-Zip: OCOEE, FL 34761 City-St-Zip: GOTHA, FL 34734

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENETTE MICHAUD T/S 06/18/2002