FILED 2003 FOR PROFIT CORPORATION Jan 09, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) L60621 DOCUMENT # 01-09-2003 90117 025 ***158.75 1. Entity Name ROSKAR CORP., INC. Mailing Address Principal Place of Business 120 DUNES EDGE RUN- ROAD 120 DUNES EDGE RUN ROAD JUPITER PL 33477 - A TOTAL CONSTRUCT JUPITER FL: 33477 3. Mailing Address 2. Principal Place of Business 313 5. Suite, Apt. #, etc. Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State 65-0181659 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent KRYDA, WILLIAM C. 120 DUNES EDGE ROAD JUPITER FL 33477 anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this state the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or pri FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Change Addition ☐ Delete TITLE TITLE NAME KLEIN. GABRIELE M NAME 120 DUNES EDGE RUN STREET ADDRESS STREET ADDRESS JUPITER FL 33477 CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition VΡ TITLE KRYDA, WILLIAM C NAME NAME 120 DUNES EDGE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33477 Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CAL SEE WILLIAM SE

561-841-0800