2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State
05-08-2000 90203 024 ***150.00

DOCUMENT # M65599

1. Entity Name

MSM DIRT SERVICES, INC.

Principal Place of Business	Mailing Address
% MARK S. MCCOLSKEY 10634 HEARTHSTONE DR. JACKSONVILLE FL 32257	% MARK S. MCCOLSKEY 10634 HEARTHSTONE DR. JACKSONVILLE FL 32223-6658

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3355 CLAIRE LANE	3355 CLAIRE LANE
Suite, Apt. #, etc. APT 513	Suite, Apt. #, etc. APT 513
City & State JACKSONVILLE, FL.	City & State JACKSONVILLE FL.
Zip: 32223 Country: USA	Zip: 32223 Country: USA

4. FEI Number 59-2868012 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCCOLSKEY, MARK S. 10634 HEARTHSTONE DR. JACKSONVILLE FL 32223	Name Street Address (P.O. Box Number is Not Acceptable) 3355 CLAIRE LANE #513 City JACKSONVILLE FL Zip Code 32223

8. 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 Mark S McColskey 4/27/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCOLSKEY, MARK S. 10634 HEARTHSTONE DR. JACKSONVILLE FL	☐ Delete	D MARK S. MCCOLSKEY 3355 CLAIRE LANE #513 JACKSONVILLE, FL. 32223	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCOLSKEY, PAULA J. 10634 HEARTHSTONE DR. JACKSONVILLE FL	☐ Delete	D PAULA J. MCCOLSKEY 3355 CLAIRE LANE #513 JACKSONVILLE, FL. 32223	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark S. McColskey 4/27/00 904-262-4397
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #