2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered,

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Mar 19, 2001 8:00 am **DOCUMENT # M80797 Secretary of State** 1. Entity Name CONCRETE IMPRESSIONS & TEXTURE, INC. 03-19-2001 90493 034 ***150.00 Principal Place of Business Mailing Address 3581 CORAL AVE 3581 CORAL AVE DELAND FL 32720 DELAND FL 32720 11 0 0 0 0 1 us US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2900143 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TREICHEL, WILLIAM A. Street Address (P.O. Box Number is Not Acceptable) 3581 CORAL AVE DELAND FL 32720 Zip Code Fl 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change ☐ Delete TITLE ☐ Addition TITLE NAME TREICHEL WILLIAM A NAME STREET ADDRESS STREET ADDRESS 3581 CORAL AVE CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME TREICHEL SUSAN B NAME STREET ADDRESS STREET ADDRESS 3581. CORAL AVE. CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 ☐ Addition TITLE ☐ Channe ☐ Delete TITLE NAME TREICHEL, JUSTIN NAME STREET ADDRESS STREET ADDRESS 3581 CORAL AVE CITY-ST-ZIP CITY-ST-ZIP **DELAND FL 32720** ☐ Delete Addition TITLE TITLE Change TREICHEL, ZACHARY NAME NAME STREET ADDRESS STREET ADDRESS 3581 CORAL AVE. CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32720 ☐ Change TITLE Delete THILE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIF TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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