2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # M98657 Apr 07, 2000 8:00 am Secretary of State FINE HOME BUILDING CONSTRUCTION, INC. 04-07-2000 90002 018 ***150.00 Principal Place of Business Mailing Address 1431 SW 1ST AVE. 1431 SW 1ST AVE. FT. LAUDERDALE FL 33315-1555 FT. LAUDERDALE FL 33315-1555 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4.-FEI:Number City & State City & State 65-0077622 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JACKSON, BILLY Street Address (P.O. Box Number is Not Acceptable) 815 S.E. 11TH AVE FT. LAUDERDALE FL 33316 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00_ 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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 12. CR2E034 (9/99) ₽D TITLE ☐ Change X Addition ☐ Delete TITLE JACKSON, BILLY NAME NAME WATSON, MARK STREET ADDRESS STREET ADDRESS 815 S.E. 11TH AVE 922 ORANGE ISLE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL FT. LAUDERDALE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE JACKSON, HARRY NAME NAME STREET ADDRESS 10291 NW 3RD COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PLANTATION FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR