DOCUMENT # P00000001100 R

1. Entity Name

DAVID UTILITIES, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

05-02-2000 90105 039 ***150.00

Principal Place of Business — BOLA ST. PORT RICHEY FL 34652

Mailing Address — 4930 BOLA ST. NEW PORT RICHEY FL 34652

2. Principal Place of Business		3. Mailing Address	
4930 Bola St. (Suite, Apt. #, etc.)		4930 Bola St (Suite, Apt. #, etc.)	
City & State: New Port Richey Fl.		City & State: New Port Richey Fl.	
Zip: 34652	Country: Pasco	Zip: 34652	Country: Pasco

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3614415 ☐ 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
REYES, JOSE 4930 BOLA ST. NEW PORT RICHEY FL 34652	Name: Jose Reyes Street Address (P.O. Box Number is Not Acceptable): 4930 Bola St. City: New Port Richey FL Zip Code 34652

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

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 REYES, JOSE 4930 BOLA ST. NEW PORT RICHEY FL 34652	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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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: José D. Reyes Pres 5-27-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

José D Reyes / Pres 7-12-00

Doc#P00000001100

308509

White Dove Business & Financial Services

11720 U. S. 19, Suite 6
Port Richey, FL 34668
(727) 861-2722 FAX: (727) 861-2809

July 13, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: David Utilities, Inc.
P00000001100

To Whom It May Concern:

This is in response to your letter dated June 19, 2000, reference David Utilities, Inc. Please be advise that officer of the company signed the annual report/uniform business report.

Please do not hesitate to contact me with any questions or information you may need.

Sincerely,

RICHARD A BOYKO, EA
Accountant