2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 03, 2001 8:00 am Secretary of State DOCUMENT # P0000045897 K & D BUILDING MATERIAL INC. 02-03-2001 90279 002 ***150.00 Principal Place of Business Mailing Address 15111 SOUTHWEST 46TH TERRACE 15111 SOUTHWEST 46TH TERRACE **MIAMI FL 33185** MIAMI FL 33185 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARNAIZ, DANIEL A Street Address (P.O. Box Number is Not Acceptable) 15111 SOUTHWEST 46TH TERRACE MIAMI FL 33185 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Change ☐ Addition ARNAIZ, DANIEL A NAME NAME STREET ADDRESS 15111 SOUTHWEST 46TH TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33185 CITY-ST-7IP ☐ Delete ☐ Change TITLE ☐ Addition TAVERA, CARLOS NAME NAME STREET ADDRESS 15111 SOUTHWEST 46TH TERRACE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33185** CITY-ST-ZIP TITLE Defete: Change - Addition-ALEXANDER, ORLANDO NAME NAME STREET ADDRESS 15111 SOUTHWEST 46TH TERRACE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33185** CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change [Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition 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 processor.

SIGNATURE:

TYPED OR PRINTED NAME OF SIG