FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 10, 2001 8:00 am DOCUMENT #20000046831 **Secretary of State** 1. Entity Name Going Up Const., Inc. 07-10-2001 90004 023 ***150.00 Principal Place of Business 213 Villa Verda .213 Villa Verde St. Augustine, Fl. ST. Augustine, Fl 32080 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$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 Going up Const., INC. Palm Coast, Fl. 32137 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 A (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 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Joseph 1). Fletcher Delete TITLE NAME NAME 213 VIIIA Verda STREET ADDRESS STREET ADDRESS ST. Augustine, Fl. 32080 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Joseph D. Fletcher 213 Villa Verda NAME NAME STREET ADDRESS STREET ADDRESS ST. Augustine, Fl. 32080 lagler Beach Fl. 32136 CITY-ST-7IP CITY-ST-ZIP Joseph D. Fletcher TITLE NAME NAME 213 Villa Verda 267 Majorca Rd STREET ADDRESS STREET ADDRESS ST. Augustine, Fl. 32082 CITY-ST-ZIP CITY-ST-ZIP Augustine, Fl TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition 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.

Daytime Phone #

SIGNATURE

attentment populies31 BUS9847

Going Up Const., Inc. 3 Debra Ln. Palm Coast, Fl. 32137 Ph/Fax 904-446-5145

June 20, 2001

Division Of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 850-487-6056

Enclosed please find the Annual Report for my Corporation. Also find check for renewal of \$150.00. I have enclosed this letter explaining why I had sent in me Annual Report past the due date. This is my first year of being Incorporated and had not received my Annual Report as of June 19, 2001. I called the Division of Corporations and requested a blank Annual Report for this year renewal. I was told to enclose a letter stating my concern of not receiving this document and the fine would be waved.

I thank you for your cooperation in this matter, and would like to confirm that my mailing address on file is correct.

Sincerely

Joe Fletcher