2002 UNIFORM BUSINESS REPORT (UBR) Sep 11, 2002 8:00 am Secretary of State **DOCUMENT #** P00000057165 1. Entity Name PLOUGH PAINTING, INC. 09-11-2002 90125 012 ***150.00 Principal Place of Business Mailing Address 5515 MACCAUGHEY DRIVE 5515 MACCAUGHEY DRIVE NORTH PORT FL 34287 NORTH PORT FL 34287 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 65-1018123 Not Applicable Country Zip 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 Name PLOUGH, LEONARD T Street Address (P.O. Box Number is Not Acceptable) 5515 MACCAUGHEY DRIVE NORTH PORT FL 34287 City Zip Code 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. I am familiar with, and accept 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 FILE NOW!!! FEE IS \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11" TITLE ☐ Delete TITLE Addition NAME PLOUGH, LEONARD T NAME 5515 MACCAUGHEY DRIVE STREET ADDRESS NORTH PORT FL 34287 CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME PLOUGH, THERESA A NAME STREET ADDRESS 5515 MACCAUGHEY DRIVE STREET ADDRESS NORTH PORT FL 34287 CITY-ST-21P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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 TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete Change ☐ Addition NAME

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

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

attachment

PLOUGH PAINTING, INC. #P0000057/65

September 6, 2002

To Whom It May Concern,

This is the first notice that we have received from the division of corporations, therefore enclosed is our check for \$150.00.

Sincerely,

Leonard Plough

President

Plough Painting, Inc.