FILED May 05, 2003 8:00 am Secretary of State 05-05-2003 90380 009 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMEN 1. Entity Name TRENCH TECH	NT # P000000951 NICIANS, INC.	98			05-05-2003	3 90380 009 ······1	30.00	
Principal Place of Business 2233 SW 34 JERRACE FT LAUDERDALE, FL 33312		Mailing Address 2233 SW 34-TERRACE FT LAUDERDALE, FL 33312			11038703			
2. Principal Place of B	Business BRIFFIN ROAD	3. Mailing Address 7552 GRIFF	~ ROAD			IF MAKING CHANGES		
City & State DAVIE F	=L.	City & State DAVIE FL		4.	4. FE) Number 65-1041796		Applied For Not Applicable	
33314	Country S A	33314	Country S A		Certificate of Status Desired	S8.75 Ad Fee Require	ditional	
	ame and Address of Current R	tegistered Agent	Name	1	Name and Address of New F	Registered Agent		
MILLER, LORIY 2233 SW 34 TERRU FT LAUDERDALE,	Street Address (P.O. Box Number is Not Acceptable)							
112.7.2.1	Ţ,			<u></u>		<u> </u>		
	<u> </u>				er Pines,		24	
8. The above named of the obligations of re	entity submits this statement for egistered agent:	the purpose of changing its r	egistered office or	registered aç	gent, or both, in the State of Fk	orida. I am familiar with	, and accept	
SIGNATURE	MULE E Lyped or printed name of registered agent an) Bu rd title i applicable. (NOTE:	Registered Agentsignat	na in principal when	neinstasing)	14 21 200 3		
After May 1	0WIII FEE IS \$150.00 2003 Fee will be \$550.00 le to Florida Department of	State			Election Campaign Fir Trust Fund Contribute	nancing \$5.0	00 May Be d to Fees?	
10.	OFFICERS AND D		11. 1016	AC	DDITIONS/CHANGES TO OFF			
NAME MILLEI STREET ADDRESS 2233 S	R, KEVIM M SW 34 TERRACE ODERDALE, FL 33312	Delete	NAME STREET ADDRESS CITY-ST-ZIP			□ Change	☐ Addition	
STREET ADDRESS 3741 S	R, JAMES E	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		GRIFFIL ROAD FL 33314	□ etange	>	
TITLE NAME STREET ADDRESS CITY-ST-ZP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-24P	`	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2P		☐ Delete	11TLE NAME STREET ADDRESS CNY-ST-2IP			☐ Change	Addition	
indicated on this re of the corporation	at the information supplied with teport or supplemental report is to or the receiver or trustee empoy attachment with an address, with the supplemental report is to or the receiver or trustee empoy attachment with an address, with the supplemental report is the supplemental report in the supplemental report is the supplemental report in the supplemental report is the su	true and accurate and that m wered to execute this report a	y signature shall h is required by Cha	ave the same	legal effect as If made under on the statutes; and that my nam	oath; that I am an officer	or director	