CR2E034 (5/01

FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 19, 2001 8:00 am Secretary of State DOCUMENT # P00000103651 1. Entity Name 07-19-2001 90237 048 ***150.00 SUNNY ISLES REMODELING, INC. Principal Place of Business Mailing Address FLCC1953 20121 C.W. 124TH PLACE--20121- G.W.- 124TH-PLAGE MIAM1 FL-00177----MIAMI FL 22177.... 2. Principal Place of Business 3. Mailing Address 13829 SAME Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number MIRMI →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 CHANG, LAWRANCE Street Address (P.O. Box Number is Not Acceptable) 20121 S.W. 124TH PLACE **MIAMI FL 33177** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 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 September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 TITLE ☐ Addition ☐ Delete NAME CHANG, LAWRANCE NAME STREET ADDRESS 20121 S.W. 124TH PLACE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33177 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME OTTO, JOHN 20121 C.W. 124TH PLACE 12990 SW 187 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33177 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME 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 ☐ 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 addre with all other like empowered.

Phone (305) 232-8375 Fax (305) 232-5895 Email sunnyisles@earthlink.net

July 05, 2001

 Florida Department of State Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Customer Service, ___

As per my phone conversation on the afternoon of July 3, 2001, I am following-up with a written letter.

We did not receive any mailing in January and an Amendment was filed to change a word in the company's name followed by a change of address:

From Sunny Isles Construction, Inc. to: Sunny Isles Remodeling, Inc. 13829 SW 142 Avenue Miami, FL 33186 (305) 232-8375

We appreciate your understanding an have enclosed a check for \$150.00 as discussed.

Sincerely,

Lawrence Chang President