FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 25, 2002 8:00 am Secretary of State DOCUMENT # P01000010937 1. Entity Name 02-25-2002 90060 019 ***150.00 G & R MARINE & FABRICATION, INC. Principal Place of Business Mailing Address 701A CORNWALL RD 701A CORNWALL RD SANFORD FL 32773 SANFORD FL 32773 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 Zip 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 TORREY, BRIAN D Street Address (P.O. Box Number is Not Acceptable) 701A CORNWALL RD SANFORD FL 32773 Zip Code City 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, 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, 2002 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE Change ☐ Addition ADREON, JUSTIN C NAME 701A CORNWALL RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SANFORD FL 32773 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME TORREY, BRIAN NAME STREET ADDRESS 701A CORNWALL RD STREET ADDRESS CITY-ST-ZIP SANFORD FL 32773 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SILVEY, MATTHEW NAME STREET ADDRESS 701A CORNWALL RD STREET ADDRESS CITY-ST-ZIP SANFORD FL 32773 CITY-ST-ZIP TITLE ☐ Delete TITLE , Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAMÉ 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. Thereby 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

SIGNATURE: 2

CR2E034 (9/01)