## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUM 1. Entity Name	MENT# PO	] FILED		
	3D Construct	ion, Inc.		03 APR 17 PM 12: 07
			WI TEN	•
DO NOT WRITE IN THIS SPACE				SECRETARY OF STATE TALLAHASSEE, FLORIDA
2. Principal Place of Business 3. Mailing Address				
			x 352	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
	striew, FL	City& State Strie	ew, Fl	4. FEI Number 59 - 3724357 Applied For Not Applicable
<sup>ℤi</sup> º 3253U	Country USA	zi32534	Country USTA	5. Certificate of Status Desired \$8.75 Additional Fee Required
-	<del></del>		Name	7 Name and Address of Current Penlatered Acces
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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				
the obligatio	ins of regristered agent	LATE	-	./
SIGNATURE Signature, Local or printed to for or registered agent and title if epithelistics. (NOTE: Negostared Agent eignature required when remistating)  DATE				
	uary 1 - May 1 Fee is \$150.00			9. Election Campaign Financing \$5.00 May Be
	Aftof May 1, Fee is \$550.00 Amended UBR is \$61.25			Trust Fund Contribution. Added to Fees
Make Check F	Payable to Florida Department of OFFICERS AND			
TITLE	President		TITLE	8
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12. 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 of 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 10 or on an attachment with an address, with all othersities empowered.				
attachment with an address, with all other like empowered.				
SIGNATURE: AUX W/JUNE 4/15/63				
SIGNATURE AND TYPED OR PRIVIED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daysme Prone #				