FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000062222

1. Entity Name 5 Star Plastering, INC



FILED Apr 30, 2004 8:00 am Secretary of State

04-30-2004 90230 045 ***158.75

94074456 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 117 NOVA VILLAGE 17 NOVA VILLAGE DI Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI, Number Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Bronde Fee Required COWAC 7. Name and Address of Current Registered Agent DO-NOT-WRITE IN THIS SPACE 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 obligations of registered agent. 4-24-04 ERNESTM. SCOTT JR. January 1 - May 1 Fee is \$150.00 9. Election Campaign Financing After May 1, Fee is \$550.00 Amended UBR is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. President CR2E034B (12/02 TITLE IIII F Ernest M. Scott SC NAME -NAME 2117 NOVA VIllage Dr STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Avie Fl MILE üssell Scott NAME NAME 900 SW 100 Ave STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MICAMAC FL 33025 CITY-ST-ZIP TILE TITLE NAME ... NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE NAME MAME STREET ADDRESS STREET ADDRESS CUY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST. 710 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 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 receives 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 other like empowered.

SIGNATURE: Crnest in Store

ERNEST M. SCOTT JR.

4-24-04

Daytime Phone #