2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Aug 22, 2003 8:00 am Secretary of State P02000030553 DOCUMENT # 08-22-2003 90108 003 ***150.00 1. Entity Name DOUG'S DRYWALL, INC. Principal Place of Business Mailing Address 5291 COLLINS ROAD #365 5291 COLLINS ROAD #365 JACKSONVILLE FL 32244 JACKSONVILLE FL 32244 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 71-087320 Not Applicable Zip Country 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 Name MOORE, DOUGLAS W Street Address (P.O. Box Number is Not Acceptable) 5291 COLLINS ROAD #365 JACKSONVILLE FL 32244 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. I am familiar with, and accept the obligations of registered aged. 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. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Addition MOORE, DOUGLAS W NAME NAME 5291 COLLINS ROAD #365 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32244 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME MOORE, SANDRA NAME STREET ADDRESS 5291 COLLINS ROAD #365 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32244 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MOORE, PHILLIP T NAME STREET ADDRESS STREET ADDRESS 7426 WARNER DRIVE CITY-ST-ZIP JACKSONVILLE FL 32244 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

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320 Osceola Avenue Jacksonville Beach, FL 32250 Phone 904/241-2533 Fax: 904/241-1604 www.triplechecktax.com

July 25, 2000

Division of Corporations Annual Reports Filing Post Office Box 1500 Tallahassee, FL 32302-1500

Re

Profit Corporation Annual Report

Document P02000030553. Doug's Drywall, Inc.

Dear Madam or Sir,

Please see the attached Annual Report for our client referenced above. We are requesting a waiver of the late fee and ask that you accept the enclosed annual report with their full payment of \$150.00.

Mr. Moore, President of the above Corporation, did not receive the first report for the current registration period. As an officer of a new corporation, he did not understand that an annual report was due and was only made aware of it when he received the second notice.

Under penalties of perjury, I declare that to the best of my knowledge and belief, the above statement is true and correct.

Thank you for your help with this matter. Please contact me if you have any questions or concerns regarding this matter.

Respectfully,

William J. Mangine III,

Enclosures:

Check # 1786

2003 UBR (2ND Notice)