## **2003 FOR PROFIT CORPORATION**

FILED Apr 23, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000039066 DOCUMENT # 04-23-2003 90153 030 \*\*\*150.00 1. Entity Name PERRICO INC. Principal Place of Business Mailing Address 11735 150TH COURT N. 11735 150TH COURT N. JUPITER FL 33478 JUPITER FL 33478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State 04-3642312 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 VAN SCHEPEN, BRENDA Street Address (P.O. Box Number is Not Acceptable) 11735 150TH COURT N. JUPITER FL 33478 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 agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition Channe Delete TITLE VAN SCHEPEN, PERRY NAME NAME 11735 150TH COURT N. STREET ADDRESS STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Delete TITLE ☐ Change NAME van Schepen, Brenda D NAME STREET ADDRESS STREET ADDRESS 11735 150TH COURT N. JUPITER FL 33478 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change - Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME

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 oth

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP