2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 21, 2008 8:00 am Secretary of State DOCUMENT # P07000028716 03-21-2008 90022 011 ***150.00 PERFORMANCE CONSTRUCTION INC. Principal Place of Business Mailing Address AUNTALIA 4 CURRY COURT **4 CURRY COURT** PALM COAST, FL 32137 PALM COAST, FL 32137 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072008 Chg-P CR2E034 (12/06) City & State City & State Applied For 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 SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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. Lam familiar with, and accept the obligations of registered agent SIGNATURE_ Screature, byoed or printed name of registered spent and title if equipsale. (NOTE: Registered Agen; signature required when renstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** TITLE ☐ Defete Addition KRYZANEKAS, EDWARD A NAME NAM-STREET ADDRESS 4 CURRY COURT STREET ADDRESS CITY-ST-ZIP PALM COAST, FL 32137 CITY-ST-Z-P ☐ Delete ☐ Change TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZP TITLE Delete TITLE ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z/P TITLE Delete THLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-7/P TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS CiTY-ST-ZIP CHTY-ST-ZiP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 offect 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.

dward Kryzanekas

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