FILED

2003 FOR PROFIT CORPORATION

Apr 24, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P92000000208 **DOCUMENT #** 04-24-2003 90104 037 ***158.75 1. Entity Name RENAISSANCE BUILDERS AND CONSTRUCTORS, INC. Principal Place of Business Mailing Address 1301 W. 68TH STREET 1301 W. 68TH STREET E-5 E-5 HIALEAH FL 33014 HIALEAH FL 33014 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 65-0389841 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee-Required: 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RODGERS, TALMER Street Address (P.O. Box Number is Not Acceptable) 1301 W. 68TH STREET HIALEAH FL 33014 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. DATE (NOTE: Registered Agent signature required when reinstating) 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME RODGERS, TALMER NAME STREET ADDRESS 1301 W 68 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33014 ☐ Addition TITLE ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIE ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME

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 his peport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if or on an attachmer

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

Delete

Daytime Phone #

☐ Change

Addition