2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 05, 2002 8:00 am Secretary of State P93000024904 DOCUMENT # 1. Entity Name KAB PAINTING, INC. 03-05-2002 90142 012 ***158.75 Principal Place of Business Mailing Address 107 SURF SONG LN., A-21 107 SURF SONG LN., A-21 DESTIN FL 32550 DESTIN FL 32550 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3174652 Not Applicable Country Zip 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 BAKER, KENNETH A Street Address (P.O. Box Number is Not Acceptable) 107 SURF SONG LN., A-21 DESTIN FL 32550 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01) TITLE ☐ Delete TITLE BAKER, KENNETH A NAME NAME 107 SURF SONG LN., A-21 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DESTIN FL 32550 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition BAKER, CHRISTOPHER NAME NAME STREET ADDRESS 107 SURF SONG LN., A-21 STREET ADDRESS CITY-ST-ZIP DESTIN FL 32550 CITY-\$T-ZIP Delete. ☐ Addition. TITLE TITLE NAME BREWER, REBECCA NAME 5 Rue O Etretat STREET ADDRESS 4070 DANCING CLOUD CT., #183 STREET ADDRESS CITY-ST-ZIP DESTIN FL 32541 CITY-ST-ZIP DESTIN FL 32541 ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

Kenneth A.Baker SIGNATURE AND PPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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 11 or Block 12 if

with all other like empowered

changed, or on an attachment with an address

SIGNATURE: