FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 04, 2001 8:00 am Secretary of State DOCUMENT # P93000056621 1. Entity Name CORESLAB STRUCTURES (ORLANDO) INC. 04-04-2001 90121 028 ***150.00 Principal Place of Business Mailing Address 11041 ROCKET BLVD. 11041 ROCKET BLVD. ORLANDO FL 32824 ORLANDO FL 32824 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 59-3199149 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ;R2E034 (10/00) TITLE ☐ Delete ☐ Addition NAME FRANCIOSA, LUIGI NAME STREET ADDRESS STREET ADDRESS 1121 HERITAGE ROAD CITY-ST-ZIP CITY-ST-7IP **BURLINGTON ONTARIO CANADA** TITLE ☐ Delete TITLE Change ☐ Addition NAME FRANCIOSA, MARIO NAME STREET ADDRESS STREET ADDRESS 1121 HERITAGE ROAD CITY-ST-ZIP+ CITY-ST-ZIP =-**BURLINGTON ONTARIO CANADA** ☐ Delete TITLE Change ☐ Addition NAME FRANCIOSA, DOMINIC NAME STREET ADDRESS STREET ADDRESS 1121 HERITAGE ROAD CITY-ST-ZIP CITY-ST-ZIP **BURLINGTON ONTARIO CANADA** TITLE □ Delete TITLE Change ☐ Addition NAME SPIEGEL, SIDNEY NAME STREET ADDRESS STREET ADDRESS 262 WILSON AVENUE CiTY-ST-7IP CITY-ST-ZIP DOWNSVIEW-ONTARIO-CANADA TITLE ☐ Delete TITLE Change ☐ Addition NAME SPIEGEL, ROBERT NAME STREET ADDRESS STREET ADDRESS 262 WILSON AVENUE CITY-ST-ZIP CITY-ST-ZIP DOWNSVIEW-ONTARIO-CANADA Delete TITLE TITLE Change ☐ Addition NAME HARRISON, MICHAEL NAME STREET ADDRESS STREET ADDRESS 11041 ROCKET BLVD. CITY-ST-ZIP CITY-ST-ZIP Korlando FL 32824 13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

like empowered.

an address, with all other

changed, or on an attachment,

_3/30/01

(407) 855-319¹

Daytime Phone #