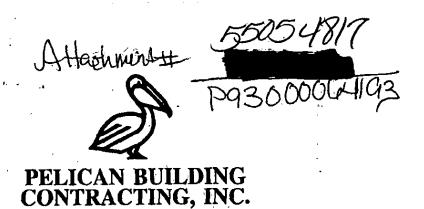
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Aug 22, 2003 8:00 am Secretary of State

8/7/

08-07-2003 90119 017 ***150.00 P93000064193 DOCUMENT # 1. Entity Name PELICAN BUILDING CONTRACTING, INC. Mailing Address 13704 WILKES DR Principal Place of Business 55054817 3411 W FLETCHER AVE TAMPA FL 33618 TAMPA FL 33618 US 2. Principal Place of Business 3, Mailing Address 3411 W. FLETCHER AVE. Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES SVITE A City & State 4. FEI Number City & State Applied For 59-3217523 Not Applicable AMPA, FI Country Country \$8.75 Additional 5. Certificate of Status Desired HUSBOROUG Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MCFADDEN, EDWARD C Street Address (P.O. Box Number is Not Acceptable) 304 PLANT AVE TAMPA FL 33606 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 tipe if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (4/03) TITLE TITLE ☐ Delete COLEMAN, DANIEL L NAME NAME 13704 WILKES DR STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition COLEMAN, LORI NAME MAME 13704 WILKES DR STREET ADDRESS STREET ADDRESS TAMPA FL 33618 .CITY-ST-ZIP. CITY-ST-ZIP Oelete TIPLE TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete THILE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 frue 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 effect its report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachm SIGNATURE:

NOTYRED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



August 4, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is to notify you that Pelican Building Contracting did not receive a prior notice stating the Uniform Business Report was due prior to May 1, 2003. I have enclosed the original filing fee of \$150.00 and would appreciate if the late fees were waived.

Thank you for your cooperation. Please contact the office if you should have further questions at 813-265-9765.

Sincerely.

Daniel L. Goleman

President .

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