2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) Mar 20, 2003 8:00 am Secretary of State DOCUMENT # P93000087553 1. Entity Name 03-20-2003 90135 045 ***158.75 PIONEER JANITORIAL SERVICE OF SUWANNEE VALLEY, I Principal Place of Business Mailing Address 13333 76TH TERRACE POST OFFICE BOX 431 20027342 LIVE OAK FL 32060 LIVE OAK FL 32064 US 2. Principal Place of Business 3. Mailing Address 13333 76+R Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3217900 Zio Not Applicable Country U S A \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent JOHNSON, JOSEPH H Street Address (P.O. Box Number is Not Acceptable) 13333 76TH TERRACE LIVE OAK FL 32060 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE NAME JOHNSON, CAROL A Change ☐ Addition NAME STREET ADDRESS 13333 76TH TERRACE STREET ADDRESS CITY-ST-ZIP LIVE OAK FL 32060 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME JOHNSON, JOSEPH H ☐ Change ☐ Addition NAME STREET ADDRESS 13333 76TH TERRACE STREET ADDRESS CITY-ST-ZIP LIVE OAK FL 32060 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME JOHNSON, MONICA D _ Change_ ____Addition_ NAME STREET ADDRESS 13333 76TH TERRACE STREET ADDRESS CITY-ST-7IP LIVE OAK FL 32060 CITY-ST-ZIP TITLE D Delete TITLE NAME JOHNSON, RICHARD M ☐ Change Addition NAME STREET ADDRESS 13333 76TH TERRACE STREET ADDRESS CITY-ST-ZIP LIVE OAK FL 32060 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME JOHNSON, BRYAN P Change ☐ Addition NAME STREET ADDRESS **13333 76TH TERRACE** STREET ADDRESS CITY-ST-ZIP LIVE OAK FL 32060 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

12. 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 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FILED