FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Jan 29, 2002 8:00 am Secretary of State P94000022203 DOCUMENT # 1. Entity Name DOLPHIN ENVIRONMENTAL & CONSTRUCTION, INC. 01-29-2002 90041 027 ***150 00 MARINATE SANDA Principal Place of Business Mailing Address 5961 ORTEGA RIVER CT 5961 ORTEGA RIVER CT JACKSONVILLE FL 32244 JACKSONVILLE FL 32244 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 59-3251447 Not Applicable 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 Name BOARDMAN, ROLAND M Street Address (P.O. Box Number is Not Acceptable) 5961 ORTEGA RIVER CT JACKSONVILLE FL 32244 Zip Code City 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, 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 9. This corporation is eligible to satisfy its Intangible After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees (See criteria on back) Make Check Payable to Department of State اي المستداد الأواها الاحد OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DPST ☐ Delete BOARDMAN, ROLAND M NAME 5961 ORTEGA RIVER CT STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32244 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 tifs report or supplied enter each gradual 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 changed, or on an attachment with an address, with all other like empowered.