FILED
Mar 17, 2003 8:00 am §
Secretary of State

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) DOCUMENT #

| 1. Entity Na B.P.S. CO | ORPORATION | 0022340 | | 03-17-2003 90071 020 ***150.00 | : | | |
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| 1779 EARHAR DAYTONA BE US | ACH FL 32124 | Mailing Address 1779 EARHART CT DAYTONA BEACH FL 3212 US | 24 | | | | |
| 2. Principal | Place of Business 9 EARHART CT. | 3. Mailing Address | | F SOUTHWEST THE SENTENCEN POWER BRIEF BRIEF CONTROL THOUSE MINIT CHEMICAL | | | |
| Suite, Apl | t. #, etc. | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANGES | | | |
| City & Sta | TONA BEACH FL | City & State | | 4. FEI Number 59-3231586 Applied Not App | | | |
| 32128 | | 32128 | Country U'S · A | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | |
| | 6. Name and Address of Current I | Registered Agent | | 7. Name and Address of New Registered Agent | | | |
| | | | Name | | | | |
| SINGY, HERMAN C | | | Stroot Addro | Street Address (P.O. Box Number is Not Acceptable) | | | |
| 500 E SEMORAN BLVD | | | Street Addre | s (r.o. box Number is Not Acceptable) | 1 | | |
| SUTE 2-J | | | | | | | |
| -CASSELBI | ERRY FL 32707 | | City | Zip Code | | | |
| • The about | | | i - | F Ŀ ∤ ' | | | |
| the obliga | e named entity submits this statement for attended from the statement for attended in the statem | the purpose of changing its | registered office or regi | tered agent, or both, in the State of Florida. I am familiar with, and a | ccept | | |
| - | · · | | | | | | |
| | | | | | | | |
| SIGNATURE | | nd title if anninable (NOTE | - Registered Agent signet us as | | _ | | |
| 's | Signature, typed or printed name of registered agent ar | nd title if applicable. (NOTE | : Registered Agent signature req | ired when reinstating) . DATE | _ | | |
| F | Signature, typed or printed name of registered agent and FILE NOW!!! FEE IS \$150.00 | nd title if applicable. (NOTE | : Registered Agent signature req | | 180 | | |
| F Afte | Signature, typed or printed name of registered agent ar | e proprie min i | :: Registered Agent signature req | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe | | | |
| F Afte | Signature, typed or printed name of registered agent at FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of | State : | | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe | es | | |
| F Afte Make Chec | Signature, typed or printed name of registered agent and FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 | State & DIRECTORS | 11. | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe | es | | |
| F Afte Make Check 10. | Signature, typed or printed name of registered agent at FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND D | State : | | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe | es | | |
| F Afte Make Check 10. TITLE NAME | Signature, typed or printed name of registered agent at FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of | State & DIRECTORS | 11. | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 | es | | |
| F Afte Make Check 10. TITLE NAME | Signature, typed or printed name of registered agent at FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND DEPARTMENT OF SODHI, BHUPINDER S | State & DIRECTORS | 11. TITLE NAME | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 | es | | |
| F Afte Make Check 10. TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered agent at FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND DEPARTMENT OF SODHI, BHUPINDER S 1779 EARHART CT | State | 11. TITLE NAME STREET ADDRESS | 9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. | ddition (co/ot) | | |
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CITY-ST-ZIP" 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Delete

BHUP INDER SODHI

Change

Addition