

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90470 044 ***150.00

DOCUMENT # P95000048297 1. Entity Name DOWN UNDER CONSTRUCTION SERVICES, INC.					
Principal Place of Business 1202 66TH STREET NORTH ST. PETERSBURG, FL 33710 US			Mailing Address 1202 66TH STREET NORTH ST. PETERSBURG, FL 33710 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country USA	Zip	Country USA	4. FEI Number 59-3327652	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent JOSLIN, JANICE K 13710 49TH ST N UNIT G CLEARWATER, FL 33762			7. Name and Address of New Registered Agent Name JOSLIN, JANICE K Street Address (P.O. Box Number is Not Acceptable) 1202 66th Street North City St. Petersburg FL Zip Code 33710		
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 title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOSLIN, JANICE K 359 12TH AVENUE INDIAN ROCKS BEACH, FL 33785	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOSLIN, JANICE K. 1202 66th Street North St. Petersburg, FL 33710	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
SIGNATURE: <u>Janice Kaye Joslin</u> JANICE KAYE JOSLIN					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date 4-25-07 Daytime Phone # 727-341-1415	