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FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 29, 2002 8:00 am Secretary of State DOCUMENT# P 95000086068 03-26-2002 90064 048 ***150.00 JOE'S POSTHOLE DIGGING SERVICE, INC. Principal Place of Business Mailing Address 9961 SW 41st ST. 9961 SW 41st ST. MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suita, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0648832 Not Applicable Ζiρ Country 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 PABLO R. MACHADO Street Address (P.O. Box Number is Not Acceptable) 9961 SW 41st STREET MIAMI, FL 33166 Cirv 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. SIGNATURE name of registered agent and title if applicable. (HOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May 8e Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete ппе Change Addition PABLO R. MACHADO 9961 SW 41 STREET MIAMI, FL 33166 NAME NAME STREET ADDRESS STREET ADDRESS CITY -ST-ZIP CITY-ST-ZIP пп.е Delete TITLE Addition ☐ Change HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-77P CITY-ST-ZIP TITLE ☐ Delete □ Change ☐ Addition MAME. MANE STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP RILE ☐ Delete IN F Change Addition HAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-SC-7P CITY-ST-ZIP TITLE Octete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutas. 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 eath; that I am an officer or director of the corporation or the receiver or trustee employered 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.

3/8/2002