FILED 2000 UNIFORM BUSINESS REPORT (UBR) Jul 11, 2000 8:00 am Secretary of State DOCUMENT # P95000090737 P AND S HOME MAINTENANCE AND REPAIR, INC. 07-11-2000 90002 034 ***150.00 Principal Place of Business Mailing Address 664 AZALEA LN 664 AZALEA LN SUITE B SUITE B VERO BEACH FL 32963-1879 VERO BEACH FL 32963 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0631008 Not Applicable Country \$8.75 Additional Zip Country Zin 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JAMES P. COVEY, P.A. Street Address (P.O. Box Number is Not Acceptable) 664 AZALEA LN SUITE B **VERO BEACH FL 32963** Zip Code City FL 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 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 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY_1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. ----Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. E034 (9/99) Addition TITLE ☐ Delete TITLE KLEIN, PAUL A NAME NAME STREET ADDRESS 712 SE SWEETBAY AVE STREET ADDRESS CITY-ST-7IP PT ST LUCIE FL 34983 CITY-ST-ZIP Addition Delete TITLE TITLE KLEIN, SANDRA J. NAME NAME STREET ADDRESS 712 S.E. SWEETBAY AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PT. ST. LUCIE FL TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 33309 CITY-ST-ZIP CITY-ST-7/P ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP Change ☐ Addition ☐ Oelete TIRE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Channe ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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 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 histee 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. SIGNATURE:

AHachment OHP950009075: DU068382

LAW OFFICES OF JAMES P. COVEY, P.A.

1111 S. Federal Highway, Suite 118
Stuart, Florida 34994
561-286-5820
FAX 561-286-1505

664 Azalea Lane, Suite B Vero Beach, Florida 32963 561-231-0006 FAX 561-234-1422

Reply to:

Stuart

June 22, 2000

Katherine Harris, Secretary of State Division of Corporations PO Box 6327 Tallahassee, Fl. 32314

Dear Ms. Harris,

Enclosed is the new check (# 1465) for one hundred and fifty dollars for P and S Home Maintenance and Repair, Inc.

Thank you,

James P. Covey