2002 UNIFORM BUSINESS REPORT (UBR)

Feb 20, 2002 8:00 am Secretary of State **DOCUMENT #** P96000006777 1. Entity Name 02-20-2002 90179 034 ***150.00 CALLAHAN'S CONSTRUCTION CLEAN-UP, INC. Mailing Address Principal Place of Business 446 S.W. 19TH STREET 446 S.W. 19TH STREET CAPE CORAL FL 33991 CAPE CORAL FL 33991 3. Mailing Address 2. Principal Place of Business P.O. BOX 152391 1724 S.W. SANTA BARBARA PL Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 65-0679616 CAPE CORAL, FLORIDA Not Applicable CAPE CORAL, FLORIDA Country Country \$8.75 Additional 5. Certificate of Status Desired 33915-2391 33991 - USA--USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JEFFREY L. CALLAHAN STEINBERG, PHILIP Street Address (P.O. Box Number is Not Acceptable) 1724 S.W. SANTA BARBARA PLACE 3515 DEL PRADO BLVD SUITE 101 CAPE CORAL FL 33904 ^Ζ፟ዮ**ና**ኇኇ CAPE CORAL 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. JEFFREY L. CALLAHAN, PRESIDENT SIGNATURE Model or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. 🗺 X Change ☐ Addition ☐ Delete DPST TITI F TITLE CALLAHAN, JEFFREY L. NAME CALLAHAN, JEFFREY NAME STREET ADDRESS 446 S.W. 19TH STREET 1724 S.W. SANTA BARBARA PLACE STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33991 CAPE CORAL FL 33991 CITY-ST-ZIP ☐ Addition ☐ Change X Delete TITLE TITLE NAME NAME CALLAHAN, TAMMY STREET ADDRESS STREET ADDRESS 446 S.W. 19TH STREET CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL FL 33991 ☐ Change ☐ Addition TITLE ~ TITLE - 🗀 Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 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 attay man address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

KATURE REQUEFFREY) L. CALLAHAN, PRES.

01/24/02

(941) 458-4733

Daytime Phone #

FILED

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