06/04/2003 00:29 9047325004 PS&C CPA'S

FILED
Jun 30, 2003 8:00 am
Secretary of State

06-09-2003 90125 019 ***150.00
06-30-2003 90065 049 ***400.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000052551

1. Entity Name
HYDRA TECH SERVICE, INC.

Principal Place of Business	Mailing Address
3874 HELLER RD CALLAHAN FL 32011 US	3874 HELLER RD CALLAHAN FL 32011 US

[redacted]

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1851 E 21st Street	
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State: Jacksonville, Fl	City & State
Zip: 32206 Country: US	Zip Country

4. FEI Number 59-3396331 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SHOUSE, RICKY A 3874 HELLER CALLAHAN FL 32011	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Ricky A. Shouse Ricky A. Shouse President 6-4-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

[redacted]

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 SHOUSE, RICKY 3874 HELLER RD. CALLAHAN FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SHOUSE, LUCY D 3874 HELLER RD. CALLAHAN FL 32011 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/02)

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.

SIGNATURE: Ricky A. Shouse Ricky A Shouse 6-4-03 904-355-9252
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #