2001 UNIFORM BUSINESS-REPORT (UBR) FILED Apr 25, 2001 8:00 am Secretary of State DOCUMENT # **P97000013513** GENERAL SERVICES ENTERPRISES, INC. 04-25-2001 90134 046 ***150.00 Principal Place of Business Mailing Address 11213 TORBERT COURT 11213 TORBERT COURT ORLANDO FL 32837 ORLANDO FL 32837 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3428619 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CREEK, TANIA Street Address (P.O. Box Number is Not Acceptable) 11213 TORBERT COURT ORLANDO FL 32837 Zip Code City 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 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Dalete TITLE ☐ Change Addition NAME PEREZ, PEDRO M NAME STREET ADDRESS 11213 TORBERT COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32837 Addition TITLE ☐ Delete TITLE Change NAME CREEK, TANIA NAME STREET ADDRESS 11213 TORBERT COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32837 ☐ Delete TITLE ☐ Change Addition NAME PEREZ, SAUL NAME STREET ADDRESS 11213 TORBERT COURT STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32837 CITY-ST-ZIP ☐ De!ete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition NAME: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition 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 attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: SCHAMBER AND TYPES OF BRIDGE THE WAR OF EIGER OR DIRECTOR

CITY-ST-7IP

TANIA GEEK 4/19/01 40

407-857-4303 Daytime Phone # CR2E034 (10/00)