FILED Jan 12, 2001 8:00 am Secretary of State 01-12-2001 90011 023 ***158.75 00003028 DO NOT WRITE IN THIS SPACE Applied For 59-3483177 Not Applicable \$8.75 Additional \$5.00 May Be Added to Fees =::: Addition CR2E034 (10/00) ☐ Addition Change ☐ Change Addition ☐ Change ☐ Addition ☐ Change ☐ Addition ☐ Change ☐ Addition

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P97000058564 AAA ROOF CLEANING AND PRESSURE WASHING SERVICE ! Mailing Address Principal Place of Business 2052 BOBTAIL DR 2052 BOBTAIL DR ORLANDO FL 32810 ORLANDO FL 32810 2. Principal Place of Business 3. Mailing Address abaz Franklin abas Franklin Ave Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number City & State City & State Ninter Winter Country 5. Certificate of Status Desired Orange orange 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Roman isa. CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 crimted 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 After MAY 1, 2001 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 OFFICERS AND DIRECTORS 12. 11. P/D ☐ Delete TITLE TITLE JORDAN, KEVIN NAME NAME STREET ADDRESS aba3 Franklin Ave 2052 BOBTAIL DR STREET ADDRESS Winter Park, F132780 ORLANDO FL 32810 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F TITLE JORDAN, DIANE NAME NAME 26a3 Franklin Ave STREET ADDRESS 2052 BOBTAIL DRIVE STREET ADDRESS ORLANDO FL 32810 CITY-ST-ZIP Winter Mark, Fl 32769 CITY-ST-ZIP ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

TITLE

NAME

STREET ADDRESS CITY-ST-7IP

☐ Delete