1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000085032

AMERICA SOUTH BUILDING & DEVELOPMENT INC.

Principal Place of Business

Mailing Address

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90035 011 ***150.00



4100 CORPORATE SQUARE, SUITE 131 4100 CORPORATE SOUARE. SUITE 131 NAPLES FL 34104 NAPLES FL 34104 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/01/1997 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Not Applicable 65-0785728 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation owes the current year Intangible Zip Country Zip Country □No Personal Property Tax. 30 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CORPORATE CREATIONS ENTERPRISES, INC. Street Address (P.O. Box Number is Not Acceptable) 82 4521 PGA BOULEVARD #211 PALM BEACH GARDENS FL 33418 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1.1 TITLE TITLE 1.2 NAME BURR, MARK E NAME 4100 CORPORATE SQUARE, SUITE 131 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34104 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 41TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP C/TY-ST-ZIP Change 6.1 TITLE Addition DELETE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS OFF HADERIL

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filips does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of vostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachylery with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: __

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)