2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 03, 2000 8:00 am Secretary of State DOCUMENT # **P97000099424** 1. Entity Name ELIAS BROTHERS PAINTING & WATERPROOFING, INC. 05-03-2000 90106 031 ***158.75 Principal Place of Business Mailing Address 4206 ENTERPRISE AVENUE 4973 TRAYNOR CT NAPLES FL 34112-3672 UNIT A-7 NAPLES FL 34104 2. Principal Place of Business 3. Mailing Address 4206 Enterprise Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 59-3481225 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ELIAS, MARIA P Street Address (P.O. Box Number is Not Acceptable) 4973 TRAYNOR CT NAPLES FL 34112 Zip Code FL 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 DATE 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition TITLE ☐ Change TITLE ☐ Delete ALIAS, AVIEL NAME NAME 4206 ENTERPRISE AVENUE UNIT A-7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 ☐ Change Addition Delete TITLE TITLE ELIAS, MARIA P NAME NAME STREET ADDRESS 4206 ENTERPRISE AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 - Change ☐ Addition -TITLE ☐ Delete TITLE ALICE, MEIR NAME NAME 4206 ENTERPRISE AVENUE, UNIT A-7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34104 ☐ Change ☐ Addition ☐ Detete TITLE ELIAS, OVADIA NAME NAME 5733 DEAUVILLE CIRCLE, G-108 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL 34112 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition 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.

FILED