2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000099954 Apr 04, 2000 8:00 am Secretary of State 1. Entity Name CONSTRUCTION EDITORIAL SERVICES, INC. 04-04-2000 90025 045 ***150.00 Principal Place of Business Mailing Address 26321 DAY FLOWER BLVD 26321 DAY FLOWER BLVD WESLEY CHAPEL FL 33544-4043 WESLEY CHAPEL FL 33544 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0798885 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LYNN, J. GRIFFITH, P.A Street 6338 PRESIDENTIAL COURT SUITE 101 FORT MYERS FL 33919 registered agent, or both, in the State of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office or DATE oured 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, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 OFFICERS AND DIRECTORS 11. **PCEO** ☐ Addition ☐ Delete TITLE Ingela Suarra ABRELL, ANGELA M NAME STREET ADDRESS 26321 DAY FLOWER BLVD STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS FL 33544 CITY-ST-ZIF Change ☐ Addition TITLE ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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.

SIGNATURE:

Ingela Sucress President

to CEO

813 907-59U

Daytime Phone #