2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 29, 2001 8:00 am DOCUMENT # P97000103121 Secretary of State 1. Entity Name ONE-UP SOLAR CONTRACTOR, INC. 03-29-2001 90366 038 ***150.00 Mailing Address Principal Place of Business 20330 S.W. 207TH AVENUE 20330 S.W. 207TH AVENUE MIAMI FL 33187 MIAMI FL 33187 000414 3. Mailing Address 2. Principal Place of Business 20330 SW 207 1033:0 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0803942 V) iAm Not Applicable \$8.75 Additional µntry 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6.- Name and Address of Current Registered Agent Name VIENNEAU, MARK R Street Address (P.O. Box Number is Not Acceptable) 20330 S.W. 207TH AVENUE MIAM! FL 33187 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 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. Added to Fees 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. ☐ Addition ☐ Delete TITLE TITLE NAME NAME VIENNEAU, MARK R STREET ADDRESS STREET ADDRESS 20330 S.W. 207TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33187 ☐ Addition Change TITLE ☐ Delete 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 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE 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

SIGNATURE: Mark VIENNEAU 3-27-01 305-252-1989

changed, or on an attachment with an address, with all other like empowered.

Date

Daytime Phone #