2001 UNIFORM BUSINESS REPORT (UBR) Apr 26, 2001 8:00 am Secretary of State DOCUMENT #P98000020553 1. Entity Name ARCHITECTURAL CORAL WORKS, INC. 04-26-2001 90118 012 ***150.00 Principal Place of Business Mailing Address 4708 Northeast 11th Avenue 4708 Northeast 11th Avenue ~vvuJJU89 Fort Lauderdale, FL 33334 Fort Lauderdale, FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0821050 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Gregory, John E. Street Address (P.O. Box Number is Not Acceptable) 4708 Northeast 11th Avenue Fort Lauderdale, FL 33334 Zip Code FI 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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. 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 11. ☐ Delete Change PST NAME John E. Gregory STREET ADDRESS STREET ADDRESS 4708 Northeast 11th Avenue CITY-ST-ZIP CITY-ST-ZIP Fort Lauderdale, FL 33334 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET, ADDRESS CITY-ST-ZIP CITY ST ZIP TITLE Delete TITLE Change Accition NAME NAME STREET ADDRESS STREE LADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 or or 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

CR2E034 (10/00)

4/20/01 John E. Gregory, Inc. RINTED NAME OF SIGNING OFFICER OR DIRECTOR

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