2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 02, 2001 8:00 am DOCUMENT # P98000024275 **Secretary of State** 1. Entity Name C/D SHELL CONTRACTORS, INC. 03-02-2001 90111 040 \*\*\*150.00 5312 NW 53rd Street Coconut Creek, Fl 33073 Principal Place of Business ±5312 NW 53rd Street Coconut Creek, Fl 33073 629661 2. Principal Place of Business 3. Mailing Address 5312 NW 53rd Street 5312 NW 53rd Street Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0895300 Coconut Creek, Coconut Creek, Fl Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 33073 33073 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOan Hamilton 2625 NE 6th Avenue Christopher J Damis
Street Address (P.O. Box Number is Not Acceptable) Nilton Manors, Fl 33334 5312 NW 53rd Street City Zip Code Coconut Creek. 33073 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 it e if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on báck) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <del>President</del> Christoper J Damis TITLE ☐ Delete TITLE Change SR2E034 (11/00 Addition NAME STREET ADDRESS 5312 NW 53rd Street STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Coconut Creek, Fl 33073 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CTIY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 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.

President

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SIGNATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

0591/3

Daytime Pf

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Daytime Phone #