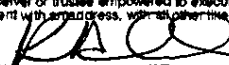


FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90100 040 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000060775					
1. Entity Name ROY ALLEN CONSTRUCTION, INC.					
Principal Place of Business 1924 E. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33334			Mailing Address 1924 E. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33334		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0848187	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALLEN, ROY 1924 E. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33334 316 SE 10 AVE, STE B POMPANO BCH FL 33060				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending) DATE					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
TITLE	P	ALLEN, ROY	☐ Delete		
NAME		1924 E. COMMERCIAL BLVD.			
STREET ADDRESS		FT. LAUDERDALE, FL 33334			
CITY-ST-ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE			☐ Delete		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE			☒ Change ☐ Addition		
NAME					
STREET ADDRESS		316 SE 10 AVE, STE B			
CITY-ST-ZIP		POMPANO BCH FL 33060			
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE			☐ Change ☐ Addition		
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a power of attorney.					
SIGNATURE:  ROY ALLEN 4/9/3					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

316 SE 10 AVE, STE B
POMPANO BCH FL 33060



☒ CHECK HERE IF MAKING CHANGES

CR2034 (1/0/02)