2001 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

Apr 14, 2001 8:00 am Secretary of State DOCUMENT # P98000101777 L & L FILL DIRT, INC. 04-14-2001 90005 035 ***158.75 Principal Place of Business Mailing Address 2125 KEYSTONE RD 2125 KEYSTONE RD TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59 **353584**# 35600/2 Not Applicable Zip Country Zip Country \$8.75 Additional X 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LAGANA, FRANK JR Street Address (P.O. Box Number is Not Acceptable) 5590 96TH TERRACE NORTH **TARPON SPRINGS FL 33782** City PINELLAS PARK 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 FRANK LAGANA JR if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10, 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 back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PST Change CR2E034 (10/00) Addition TITLE Delete TITLE LAGANA, FRANK JR NAME NAME STREET ADDRESS STREET ADDRESS 5590 96TH TERRACE NORTH CITY-ST-ZIP CITY-ST-7IP PINELLAS PARK FL 33782 ☐ Change ☐ Addition X Delete TITLE TITLE SCHRAMEK, DANIEL E NAME NAME STREET ADDRESS STREET ADDRESS 212-41ST AVE NO. CITY-ST-ZIP CITY-ST-ZIP ST PERERSBURG FL 33703 TITLE Defete TITLE 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-ZIP CITY-ST-ZIF Change TITLE ☐ Delete TITLE. Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE 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 eath; 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

FRANK LAGANA JR 3-22-01