2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 19, 2001 8:00 am Secretary of State DOCUMENT # P98000104797 1. Entity Name VERO INDUSTRIAL SUPPLY, INC. 04-19-2001 90001 021 ***150.00 Principal Place of Business Mailing Address C/O HATCH & DOTY, P.A. 1701 HWY A1A. STE. 220 C/O HATCH & COTY, P.A. 1701 HWY. (A. STE. 220 VERO BEACH PL 32963 VERO BEACK FL 32963 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 65-0882130---Not Applicable Zip 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 JONES, RICHARD S JR Street Address (P.O. Box Number is Not Acceptable) 760-10 8TH COURT VERO BEACH FL 32962 Zip Code City 8. The above named expry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating) 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (10/00) ☐ Delete ☐ Addition TITLE TITLE NAME JONES, RICHARD S NAME STREET ADDRESS STREET ADDRESS 760-10 8TH COURT CITY-ST-ZIP CITY-ST-7IP VERO BEACH FL 32962 Change ☐ Addition TITLE ☐ Delete TITLE NAME JONE, ELLEN M NAME STREET ADDRESS STREET ADDRESS 760-10 8TH COURT CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Delete TITLE □ Change ☐ Addition TITLE 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 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-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.