2001, UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State DOCUMENT # P9900005698 JULY-ISA PLUMBING CORPORATION 05-11-2001 90024 030 ***150.00 Principal Place of Business Mailing Address 31 EAST 38TH STREET 31 EAST 38TH STREET HIALEAH FL 33013 HIALEAH FL 33013 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 65-0889694 Not Applicable Zip Country 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 LEDESMA, JOSE L Street Address (P.O. Box Number is Not Acceptable) 31 EAST 38TH STREET HIALEAH FL 33013 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Delete TITLE TITLE PLEGESMA, Jose L Change ☐ Addition 31 East 38Th St NAME LEDESMA, JOSE L NAME STREET ADDRESS STREET ADDRESS 3520 N.W. 79 STREET LOT D-436 HIALEAL FI 33013 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33147** Delete V) LEDESMA CRISTINA TITLE TITLE ☐ Addition NAME GOMEZ, CRISTINA NAME 31 East 38 th 37 STREET ADDRESS 3520 N.W. 79 STREET LOT D-436 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33147 TITLE Delete TITLE Change ☐ Addition and and the side NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete 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 TITLE TITLE Delete 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 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

URE AND TYPED OR PRINTED NAME OF SI SER OR DIRECTOR

CR2E034 (10/00)