2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 13, 2002 8:00 am Secretary of State DOCUMENT # P99000056064 1. Entity Name 05-13-2002 90243 032 ***158.75 ZEAL CONSTRUCTION, INC. Principal Place of Business Mailing Address 1362 ABAGAIL DRIVE 30122 CINNAMON AVE. **DELTONA FL 32725 EUSTIS FL 32736** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & Statě City & State 4. FEI Number Applied For 59-3573847 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 GREGORY D. RICHBURG, VICTOR RICHBURG is (P.O. Box Number is Not Acceptable) 22 CINNAMON AVE. 1362 ABAGAIL DR. **DELTONA FL 32725** City Zin Code 32736 **EUSTIS** 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. 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, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE . D Delete TITLE Change ☐ Addition RICHBURG, GREGORY D NAME NAME 30122 CINNAMON AVE STREET ADDRESS STREET ADDRESS EUSTIS FL 32736 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME RICHBURG, VICTOR R NAME STREET ADDRESS 1362 ABAGAIL DRIVE STREET ADDRESS CITY-ST-ZIE **DELTONA FL 32725** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change **★** Addition NAME NAME TAMELA M. RICHBURG STREET ADDRESS STREET ADDRESS 30122 CINNAMON AVE. CITY-ST-ZIP CITY-ST-ZIP EUSTIS, FL 32736 Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE: