Amenda	ICUT		•		·
2001 UNIFORM BUS	NESS REPORT	(UBR)	, FILE	ED	
DOCUMENT # P9900067186 1. Entity Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Lighthouse Waterproofing INC			01 SEP -5 PM 2: 26		
Principal Place of Business Mailing Address					
11650 marterly					•
Principal Place of Business 3. Mailing Address					
11650 mastez Ln 1111-70 5an Ja Suite, Apt. #, etc. Suite, Apt. #, etc.		se Blud	DO NOT WRITE IN THIS SPACE		
PMB 124			DO NOT WHITE IN THIS GLACE		
JAX FC JackSonville		FL	4. FEI Number 59-3589	7817	Applied For Not Applicable
32223 COUNTY	32223 U	S A	5. Certificate of Status Desired	Fee	75 Additional Required
6. Name and Address of Current Registered Agent		Name	7:-Name and Address of New Re	gistered Agen	t
himberly Brown					
1111-70 52n'Jose Blud,		Street Address (P.O. Box Number is Not Acceptable)			
LUCKRON rolls E 39293					
Same		City		FL 2	Zip Code
The shows named entity submits this statement for	the nurses of changing its register	ad office or recistor	ad agent or both in the State of Fla-	rido	

FILE NOW!!! FEE IS \$550.00

Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 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 100004583501---TITLE Kimberry Brown Blud Ambiry *Hesident* TITLE NAME NAME -09/11/01--01051--015 STREET ADDRESS STREET ADDRESS JAX, Pr. 30223 Vice Presidents a Doles Darry Brown 52 Union #124 *****61.25 *****61.25 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS JAX FL 32273 CITY-ST-ZIP CITY-ST-ZIP Secretary Edward J. Collins 1111-70 San Jose Blvd JACLO SONUTTE, FU 3 Sccretary TITLE ☐ Change Addition TITLE ☐ Defete NAME PMB 124 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **223** TITLE ☐ Delete TITLE ☐ Addition 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 ☐ Change ☐ Addition TITLE-- 🗔 Delete _TITLE. _ NAME NAME SP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

No Chana

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 they could be under outly that I am an officer or director of the corporation or they could be under outly and appears in Block 11 or Block 12 if changed, or on an attackment with a papears, with all other like empowered.

SIGNATURE

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

9. This corporation is eligible to satisfy its Intangible

Kimberly S. Brown

8/13/01

10. Election Campaign Financing

904.880.1864

\$5.00 May Be

(5/01)