2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # **P99000077412** INTERNATIONAL PAVING SYSTEMS, INC. 05-03-2001 90479 001 *2.250.00 Principal Place of Business Mailing Address POST OFFICE BOX 9588 POST OFFICE BOX 9588 FORT LAUDERDALE FL 33310 FORT LAUDERDALE FL 33310 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 36-3180612 Not Applicable Zip Country 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 SITTER, GENE C Street Address (P.O. Box Number is Not Acceptable) 2526 W. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33311 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 DATE Signature, typed or printed name of registered agent and title if applicable. (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 (See criteria on back). Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition TITLE D ☐ Delete CHRIST, J NAME NAME STREET ADDRESS STREET ADDRESS 2526 W. OAKLAND PARK BLVD. CITY-ST-7IP CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Addition ☐ Delete TITLE ☐ Change TITLE SITTER, L M NAME NAME STREET ADDRESS STREET ADDRESS 2526 W. OAKLAND PARK BLVD. CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Delete □ Change ☐ Addition TITLE SITTER, GENE C NAME NAME STREET ADDRESS STREET ADDRESS 2526 W. OAKLAND PARK BLVD. CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33311 ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Gene C. Sitter, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-26-01

954-735-8800

CR2E034 (10/00)