2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 503198 RTM General Contractors, Inc. 00 APR 24 AM 11:37 Principal Place of Business Mailing Address 205 Red Bud Lane. Longwood, FL 32779 2. Principal Place of Business 3. Mailing Address 205 Red Bud Lane 205 Red Bud Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Longwood City & State City & State 4. FEI Number Applied For Longwood. Long wood 59-3031325 Not Applicable Country Zip 32719 \$8.75 Additional 5. Certificate of Status Desired Schinole 32779 Seminole Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Kussell L. DeVore Street Address (P.O. Box Number is Not Acceptable) 205 Red Bud Lane Longwood, FL 32779 Zip Code FL 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) DATÉ 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, 2000 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 11. OFFICERS AND DIRECTORS 12 Change Addition TITLE ☐ Delete TITLE tresident Russell L. DeVore NAME STREET ADDRESS 205 Red Bud Lane Longwood, FL 32774 CITY-ST-7IP Vice President Addition □ Delete TITLE Change Tom AuH NAME 9956 Timber Daks Court STREET ADDRESS Orlando, Ph 32817 CITY-ST-ZIP Secretary Russell L. DeVore ☐ Change Addition ☐ Delete STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITL F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS 205 Red Bud Lane rongwood, ML 32779 CITY-ST-71F CITY-ST-ZIP Treasurer Devore ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME 205 Rea Bud Lane STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Longwood, FL 32779 400003220**544-**----TITLE ☐ Delete TITLE NAME NAME -04/24/00--01069--022 STREET ADDRESS STREET ADDRESS ****158.75 ****158.75 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.

CITY-ST-ZIP

TITLE NAME STREET ADDRESS

☐ Delete

TITLE

STREET ADDRESS

CITY-ST-ZIP

Tresielf & De Vac RUSSELL 4. DEVORE 4-24.00 4078622493 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Addition

☐ Change