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FILED
Apr 20, 2001 8:00 am
Secretary of State

02-08-2001 90147 035 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S30483**

1. Entity Name

DURA-STATIC OF CENTRAL FLORIDA INC

Principal Place of Business

337 BRANDYWINE DRIVE
VALRICO FL 33594

Mailing Address

337 BRANDYWINE DRIVE
VALRICO FL 33594

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3048002

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CUNNINGHAM, BRANDON
337 BRANDYWINE DRIVE
VALRICO FL 33594

7. Name and Address of New Registered Agent

Name Jake Martin

Street Address (P.O. Box Number is Not Acceptable)

915 Shunk Ave Apt C-33606 Kennedy BlvdCity Coskettville TampaFL 70 FLZip Code 33609

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 resigning)

DATE

4-11-01

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	CUNNINGHAM, BRANDON	
STREET ADDRESS	337 BRANDYWINE DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	ST	☒ Delete
NAME	CUNNINGHAM, LYNETTE	
STREET ADDRESS	337 BRANDYWINE DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☒ Change ☐ Addition
NAME	Jake Martin	
STREET ADDRESS	3606 Kennedy Blvd	
CITY-ST-ZIP	Tampa, FL 33609	
TITLE	Secretary	☒ Change ☐ Addition
NAME	Rachael Kuhnert	
STREET ADDRESS	3606 Kennedy Blvd	
CITY-ST-ZIP	Tampa, FL 33609	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE:

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jake Martin

2-4-01

931-526-4898

Date

Daytime Phone

Jake Martin

4-11-01

CR2E034 (10/00)