2001 UNIFORM BUSINESS REPORT (UBR)

Mar 23, 2001 8:00 am Secretary of State **DOCUMENT # \$57130** KENNEDY CONSTRUCTION GROUP, INC. 03-23-2001 90038 037 ***158.75 Principal Place of Business Mailing Address 600 W. HILLSBORO BLVD. 600 W HILLSBORO BLVD. 101 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 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. FÉI Number 65-0265536 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TRAUTMAN, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 600 W. HILLBORO BLVD STE 101 **DEERFIELD BEACH FL 33441** Zip Code City 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 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 12. 11. Change ☐ Addition ☐ Delete TIT: F TITLE NAME NAME KENNEDY, ROBERT N STREET ADDRESS STREET ADDRESS 600 W HILLSBORO BLVD SUITE 101 CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BEACH FL 33441** Change ☐ Addition TITLE Delete TITLE NAME TRAUTMAN, ROBERT J NAME STREET ADDRESS 600 W HILLSBORO BLVD SUITE 101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BEACH FL 33441** Addition "Delete" TITLE Change TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

Robert J. Transman 3/20/01

FILED