2002 UNIFORM BUSINESS REPORT (UBR)

Aug 19, 2002 8:00 am Secretary of State S85549 DOCUMENT # 1. Entity Name 08-19-2002 90130 001 *1.100.00 GULF BUILDING CORP. Principal Place of Business Mailing Address **600 CORPORATE DRIVE** 600 CORPORATE DRIVE SUITE 512 SHITE 512 FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0290172 Not Applicable Zip-Country Zip 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 PALMIER, THOMAS J Street Address (P.O. Box Number is Not Acceptable) 201 S. BISCAYNE BLVD **SUITE 3000** MIAMI FL 33131 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (4/02)TITLE ☐ Delete TITLE Addition COLLINS, JOHN D. NAME NAME 600 CORPORATE DRIVE., #512 STREET ADDRESS CR2E034 STREET ADDRESS FT. LAUDERDALE FL. CITY-ST-ZIP CITY-ST-ZIP **VPS** TITLE ☐ Delete TITLE ☐ Change Addition UELLENDAHL, SVEN D. NAME NAME 600 CORPORATE DRIVE, #512 STREET ADDRESS STREET ADDRESS CITY-ST-7IP. FT. LAUDERADALE:FL--- == --CITY-ST-ZIP D TITLE ☐ Delete TITLE Addition ☐ Change UELLENDAHL, SVEN D. NAME NAME 600 CORPORATE DRIVE, #512 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT. LAUDERADLE FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition 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

8-15-02 954-492-4141

FILED