~~FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00~~ Amended

PROFIT CORPORATION ANNUAL REPORT

Amended 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 SEP 28 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 586956

1. Corporation Name: STS Builders, Inc.

Principal Place of Business: 16664 Hamlin Blvd. Loxahatchee, Fla 33470

Mailing Address: P.O. Box 8368 Jupiter Fla 33468

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10-11-91

4. FEI Number: 65-0289063 — Applied For / Not Applicable

2. Principal Place of Business — 21 Suite, Apt #, etc — 22 City & State — 23 Zip — 24 Country — 25

2a. Mailing Address — 26 Suite, Apt #, etc — 27 City & State — 28 Zip — 29 Country — 30

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
Lavon Speck
16664 Hamlin Blvd.
Loxahatchee, Fla 33470

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (Signature of a member of the Board of Directors or authorized officer required if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE President	NAME Sandie L. Speck	STREET ADDRESS P.O. Box 8368 CITY-ST-ZIP Jupiter, Fl 33468 (N/A) ☑ DELETE
TITLE Secretary	NAME Lavon T. Speck	STREET ADDRESS P.O. Box 8368 CITY-ST-ZIP Jupiter Fl 33468 (N/A) ☑ DELETE
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP ☐ DELETE
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP ☐ DELETE
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP ☐ DELETE
TITLE	NAME	STREET ADDRESS CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

President	David Biagetti	P.O. Box 8368, Jupiter, Fl 33468 (N/A) ☑ Change ☐ Addition
Secretary	David Biagetti	P.O. Box 8368 Jupiter Fl. 33468 (N/A) ☑ Change ☐ Addition
Director	David Biagetti	P.O. Box 8368 Jupiter Fl. 33468 (N/A) ☐ Change ☑ Addition
Treasurer	David Biagetti	P.O. Box 8368 Jupiter, Fl. 33468 (N/A) ☐ Change ☑ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

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-09/29/98--01076--009
*****41.25 *****41.25

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-09/29/98--01076--010
*****20.00 *****20.00

14. 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. Further, I certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DAVID BIAGETTI David Biagetti 7/29/98 561-936-5517
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)