2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O

FILED Jan 30, 2001 8:00 am Secretary of State **DOCUMENT # \$93467** 1. Entity Name INDUSTRIAL MAINTENANCE SERVICES, CORP. 01-30-2001 90089 002 ***150.00 Principal Place of Business Mailing Address 3371 SW 3RD ST. 3371 SW 3RD ST. DEERFIELD BCH, FL 33442 DEERFIELD BCH. FL 33442 VVINIUU 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Pompano Brach, FL. Applied For 4. FEI Number 65-0304783 OMPANO Not Applicable \$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 URBINA, EDGAR O. Street Address (P.O. Box Number is Not Acceptable) 3371 SW 3RD ST. DEERFIELD BCH. FL 33442 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 (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE URBINA, EDGAR O. Change ☐ Addition NAME URBINA, EDGAR O. NAME 1725 NE SOTH ST. STREET ADDRESS 3371 SW 3RD ST. STREET ADDRESS POMPANO BEACH, FL. 33064 CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BCH. FL URBINA, ORDINA TITLE ☐ Delete TITLE NAME URBINA, ORAIMA NAME 1725 NE SOTH ST. STREET ADDRESS 3371 SW 3RD ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OMPANO BEACH, FL. 33064 DEERFIELD BCH. FL TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS 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.