2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 02, 2004 08:00 AM Secretary of State DOCUMENT # V10633 1. Entity Name PROPERTY PRESERVATION, INC. Principal Place of Business Mailing Address 2145 W. DAVIE BLVD. SUITE 203 2145 W. DAVIE BLVD. FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 65-0308015 Not Applicable Zio Country Zio 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 YARGER, GUY E Street Address (P.O. Box Number is Not Acceptable) 2145 W. DAVIE BLVD. **SUITE #203** FT. LAUDERDALE FL 33312 City Zip Code 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 Gray E. Miget Signature, typed to priviled years of egyptered agent and tried applicable SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. THE Delete TITLE ☐ Change ☐ Addition NAME YARGER, GUY E NAME U00000028556 STREET ADORESS 2145 W. DAVIE BLVD. #203 STREET ADDRESS 02/04/04-80031-007 158.75 CITY - ST - ZIP FT. LAUDERDALE FL 33312 CITY-ST-7/P ☐ Change THUE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SY-ZIP CITY-ST-ZIP TIGE Delete 31TR F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 1851.5 Delete SISS F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 037Y-ST-73P Change ☐ Detete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CATY-ST-ZIP 12. 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 shell 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NG OFFICER OR DIRECTOR

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