2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1. Entity Name PBS & J CONSTRUCTION SERVICES, INC.								FILED 03 JAN 15 PM 2: 27					
Principal Place of Business 2001 N.W. 107TH AVENUE MIAMI FL 33172			Mailing Address 2001 N.W. 107TH AVENUE MIAMI FL 33172				SECRETARY OF STATE TALLAHASSEE, FLORIDA						
2. Principal F	Place of Busin	ness	3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF I	MAKING (CHANGES			
City & State			City & State					4. FE	El Number 65-0357416	Applied For Not Applicable			
Zip Country			Zip					5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name	and Address of Current	Registere	gistered Agent			7. Name and Address of New Registered Agent Name						
SCHAFFER, BECKY S 2001 N.W. 107 AVENUE						Street Address (P.O. Box Number is Not Acceptable)							
MIAMI FL	33172-2507	•									- 		
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													
F Afte Make Checl	DO.				1	Election Campaign Finance Trust Fund Contribution.		Added	O May Be to Fees				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		OFFICERS AND I, JAMES M JR. 107TH AVENUE 33172	DIRECTO	Delete			Y ()	(10001232: 2/12/03010110	,	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO LARSON, I	randy L 107th avenue		☐ Delete	4		P/C	€0/	/D		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		RICHARD A 107TH AVENUE 33172		☐ Delete			5/7	-/D	•		Change	Addition	
TITLE Name Street address City-St-Zip		RICHARD M 107TH AVENUE 33172		☐ Delete					10.1	1	□ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		R, BECKY S 107TH AVENUE 33172		☐ Delete	- 1			•	MM		Change	Addition	
	VD TERRY, LA 2001 N.W. MIAMI FL 3	107TH AVENUE		Delete							Change	Addition	
12. I hereby of indicated	certify that the on this repor	e information supplied with	true and a	accurate and that m	y signat	ure shall h	ave the s	ame le	19.07(3)(i), Florida Statutes. I fu gal effect as if made under oath a Statutes; and that my name ap	; that I am	an officer	or director	

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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