FILED

Jul 14, 2003 8:00 am Secretary of State

07-14-2003 90347 043 ***550.00

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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V69054

1. Entity Name

SIGNATURE:

PARKER'S CUSTOM SHEET METAL, INC.

				-V			
Principal Place of Business 1300 SW 10TH STREET 6 & 7 DELRAY BEACH FL 33444			Mailing Address 1300 SW 10TH STREET 6 & 7 DELRAY BEACH FL 33444				
US			US				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES
City & State			City & State			4.	FEI Number 65-0372363 Applied For Not: Applicable.
Zip	Zip Country		Zip Cour		ntry .	5.	Certificate of Status Desired
	6. Name	and Address of Current	Registered Agent			7.	Name and Address of New Registered Agent
					Name		
KNUTH, BRADLEY C 316 N.E. 3RD ST					Street Add	ress (P.O.	Box Number is Not Acceptable)
DELRAY BEACH FL 33444							
					City		FL 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.							
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if applicable. (N	OTE: Registere	ed Agent signature :	required when	n reinstating) DATE
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	316 N.E. (DELRAY E		□ Delate	•	Į.		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPICHTY, 316 N.E. 3 DELRAY E	BRD ST.	☐ Delete			· _ · _ · _	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete				☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	•			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete				☐ Change ☐ Addition
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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							