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

FILED Feb 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (2)V73973 TED WOLFF II BUILDING AND REMODELING CONTRACTORS , INC. Principal Place of Business Mailing Address 3048 GYPSY ST 3048 GYPSY ST SARASOTA FL 34231 SARASOTA FL 34231 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3048 Gypsy 3048 64054 65-0366840 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing SARASOTA Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 US A Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name DESJARLAIS, MARY LYNN 8075 SO. BENEVA RD., STE. 6 Street Address (P.O. Box Number is Not Acceptable) 82 SARASOTA FL 34238 63 84 City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1 1 TITLE TITLE WOLFF, TED, SR. NAME 12 NAME 3048 GYPSY ST STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME

64 CITY-ST-ZIP CITY - ST - ZIP 14. Thereby 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 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 13 if changed of the corporation attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

4.4 CITY - ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

TITLE

NAME

NAME

941-374-3501

☐ Addition

Addition