| 1392 DREXEL   |   |                            |   |                     |
|---|---|----------------------------|---|---------------------|
|   | EACH, FL 33417  |                            |   |                     |
|   |   |                            |   |                     |
| Current Mai   | ling Address:   |                            |   |                     |
| 1392 DREXE  | EL RD.  |                            |   |                     |
| WEST PALM   | 1 BEACH, FL 33417   |                            |   |                     |
| FEI Number: 65-1261764 Certificate of Status  |   |                            | Certificate of Status Desi                | red: No             |
| Name and A  | ddress of Current Registered Agent:   |                            |   |                     |
| SHERRON PER   | RMASHWAR, CPA   |                            |   |                     |
| 125 SOUTH ST  | ATE ROAD 7 STE 104-230<br>, FL 33414 US   |                            |   |                     |
| 125 SOUTH ST<br>WELLINGTON  | ATE ROAD 7 STE 104-230  | registered office or regis | tered agent, or both, in the State of Flo | rida.               |
| 125 SOUTH ST<br>WELLINGTON<br>The above named   | ATE ROAD 7 STE 104-230<br>, FL 33414 US   | registered office or regis | tered agent, or both, in the State of Flo | rida.<br>04/27/2016 |
| 125 SOUTH ST<br>WELLINGTON<br>The above named   | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its  | registered office or regis | tered agent, or both, in the State of Flo |                     |
| 125 SOUTH ST<br>WELLINGTON<br>The above named   | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E: SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent   | registered office or regis | tered agent, or both, in the State of Flo | 04/27/2016          |
| 125 SOUTH ST<br>WELLINGTON<br>The above named<br>SIGNATURE  | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E: SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent   | registered office or regis | tered agent, or both, in the State of Flo | 04/27/2016          |
| 125 SOUTH ST<br>WELLINGTON<br>The above named<br>SIGNATURE<br>Officer/Dire                              | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E: SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent<br>Ctor Detail :  |                            |   | 04/27/2016          |
| 125 SOUTH ST<br>WELLINGTON<br>The above named<br>SIGNATURE<br>Officer/Dired<br>Title                    | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E: SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>D P                                       | Title                      | D   | 04/27/2016          |
| 125 SOUTH ST<br>WELLINGTON<br>The above named<br>SIGNATURE<br>Officer/Dired<br>Title<br>Name            | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>D P<br>LATIFF, ABDOOL A<br>1392 DREXEL RD. | Title<br>Name              | D<br>LATIFF, MEDORA V<br>1392 DREXEL RD   | 04/27/2016<br>Date  |
| 125 SOUTH ST<br>WELLINGTON<br>The above named<br>SIGNATURE<br>Officer/Dired<br>Title<br>Name<br>Address | ATE ROAD 7 STE 104-230<br>, FL 33414 US<br>d entity submits this statement for the purpose of changing its<br>E SHERRON PERMASHWAR<br>Electronic Signature of Registered Agent<br>Ctor Detail :<br>D P<br>LATIFF, ABDOOL A<br>1392 DREXEL RD. | Title<br>Name<br>Address   | D<br>LATIFF, MEDORA V<br>1392 DREXEL RD   | 04/27/2016<br>Date  |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

AGENT

SIGNATURE: ABDOOL LATIFF

Electronic Signature of Signing Officer/Director Detail

04/27/2016

Date

## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000138520

Entity Name: A&M BOBCAT SERVICE INC.

## **Current Principal Place of Business:**