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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	.144461
4 Corporation Name	011101

RODBERG CONSTRUCTION, INC.

Principal Place	e of Business	Mailing Address						•		
4815 GEORGIA		4815 GEORGIA AVE.								
W. PALM BEACH FL 33405-2815 W. PALM BEACH FL 33405-2815		2815			DO NOT WRITE IN TH	IIS SF	² ACE	:		
						3. Date Incorporated or Qualifed				
						12/01/1986				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		T	Apr	olied For
21		26				59-2747684		Ţ		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						s. Certificate of Status Desired	\$8.75 Additional Fee Required			
27							Fee R			
City & State City & State						6. Election Campaign Financing	\$5.00 May Be Added to Fees			
23				try		Trust Fund Contribution 8. This corporation owes the current year	Intan			0 1 665
Zip	Country 25	`	30	u y		Personal Property Tax.] Yes		□No
24	g Name and Address of Curre		30;			10. Name and Address of New Register	ed Ag	ent		
	3. 10000		1	B1	Name					
ROD	Berg, Mark O.				Ot -4 4 4 4	(D.O. Boy Number is Not Assentable)				
4815	GEORGIA AVE		1	82	Street Addr	ress (P.O. Box Number is Not Acceptable)				
W. P	ALM BEACH FL 33405		ļī.	83						
, •	•		-					05	Zip C	`odo
			'	84	City	F	;L	85	Zip C	ode
office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered a	e of Florida. Such change was au gations of, Section 607.0505, Flori	tnonzed i da Statut	by tes.	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointn	nent	as reg	gistered
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS				
TITLE	DP	☐ DELETE	1.1 TITL	E				Ch	ange	☐ Addition
NAME	RODBERG, MARK O.		1.2 NAME							i
STREET ADDRESS			1.3 STREET ADDRESS		ADDRESS				==	
CITY-ST-ZIP	W. PALM BEACH FL		14 CITY-ST-ZIP					7.06		Addition
TITLE		☐ DELETE		£			L	Chi	inge	
NAME			2.2 NAME							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		☐ DELETE	2. 4 CIT		T-ZIP		г	□ Ch	anne	Addition
TITLE			3.1 TITL						J. igo	
NAME			3.2 NAN		ADDDCCC					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CIT		1-21] Ch	ange	Addition
NAME	,	_ · · · 1		ME			•	_	•	_
			1		ADDRESS					
STREET ADDRESS CITY-ST-ZIP			4.4 CIT							
TITLE		☐ DELETE	5.1 TITL		-			Ch	ange	Addition
NAME		_	5.2 NAM							
STREET ADDRESS			5.3 STR	REET	ADDRESS					
CITY-ST-ZIP			5.4 CIT)	Y-ST	-ZiP					
TITLE		☐ DELETE	6.1 TITL	E			[Ch	ange	Addition
NAME			6.2 NAA	ИΕ						
			6 1 CTD	SEET	ADDRESS					

14. 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 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 requirer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charted, or an arachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR