FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State

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DOCUMENT # P01000007613				ì		Secretary of State 05-21-2002 91167 035 ***150.00				
1. Entity Name						03-21-2002 5	71107 US	130.00		
Nurende	erg Construction, Inc	<i>i</i> •		_						
		<u> </u>				•				
						•				
[OO NOT WRITE	IN THIS	SPAC	E						
2. Principal Place of Business 7.21 US Hwy One 7.21 US Hwy One			One							
731 US Hwy One Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Ste 122		Ste 122				El Number		Applied For	1	
City & State	alm Beach FL	City & State North Palm	Beach F	'L		55-1083979		Not Applicable	1	
33 4 08	Country	3 ^{Zip} 33408	Coun		5. (Certificate of Status Desired		8.75 Additional e Required		
33400						me and Address of Current Re			- - -	
				Name Ahi		M. Lauterborn				
DO NOT WRITE					ess (P.O. Box Number is Not Acceptable) I US Hwy One Ste 122					
•				/2.	USF	wy One Ste 122			4	
	IN THIS SP	ACE							_	
				City Nort	ch Pal	lm Beach	FL	Zig 59098		
8. The above	named entity submits this statement for	r the purpose of chang	ing its register	ed office or regi	stered ag	ent, or both, in the State of Florid	a.		'	
	and the same						1/26/2	002		
SIGNATURE _	Abigail M. Lauterbe Signature, typed or printed name of registered agent a		(NOTE: Registere	d Agent signature rec	quired when re		DATE			
		tanuan	/ 1 - May 1 F	ee is \$150.00					1	
	ration is eligible to satisfy its Intangible equirement and elects to do so.	Afte	After May 1, Fee is \$550.00			 Election Campaign Finant Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees		
	ia on back)		Amended UBR is \$61.25 Make Check Payable to Department of St			Treat Ford Bornared term				
11.	OFFICERS AND	DIRECTORS							┤╒	
TITLE	P Daniel Nurenberg		TITL: NAM	- 1					120	
NAME STREET ADDRESS	720 S Pennock Lane			ET ADDRESS					9	
CITY-ST-ZIP	Jupiter, FL 33458		CITY	-ST-ZIP					18	
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TITLE	9	× 4	TITL				7	ś		
NAME STREET ADDRESS				EET ADDRESS						

13. 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 11 or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR ENHANCED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/26/02

Daytime Phone #