SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P95000090468 (6)

CONSTRUCTION SERVICES OF BROWARD, INC.

Principal Place of Business	Mailing Address

Jun 03 1997 8:00am Secretary of State



FILED

Principal Plac	ipal Place of Business Mailing Address		T HADILDAN LISA HENAL BUILL ADENI DESIN DESIN BONN BONN BENN DENI PLANT BUILD HEN FORT					
1380 S. OCE	AN BLVD.	1360 S. OCEAN BLVD.						
SUITE 1506		SUITE 1506						
POMPANO BE	POMPANO BEACH FL 33062 POMPANO BEACH FL 33062			3. Date Incorporated or Qualified 3a. Date of Last Report 11/28/1995				
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	·L · · · · · · · · · · ·	Applied For	
21 2501	E. Commercial Blu	26 250/ E. Comm	ercial.	Blud	65-0620492		Not Applicab	
Suite, Apt.	#, etc.	Suite, Apt. # etc			5. Certificate of Status Desired		8.75 Additional	
22 805		27 205			5. Cermicate of Status Exestred	<u> </u>	Fee Required	
City & State City & State			6. Election Campaign Financing		\$5.00 May Be			
	hovdardal+.Fh	28 FORT houd	ardul	4, F4	Trust Fund Contribution		Added to Fees	
Zip 24 333	Country	Zip 29 33308	Countr 30 Bro		8. This corporation has liability for it		•	
24 333	9. Name and Address of Current		[30] 7070	wara	Florida Statutes 10. Name and Address of New Reg		No	
		neglateled Agent	81	Name	TO. Name and Address of New He	Jistoreu Age	(1)	
	DER, JANET			<u> </u>				
	BO S. OCEAN BLVD.		82	Street Adi	et Address (P.O. Box Number is Not Acceptable)			
	ITE 1506		83	 				
(PO	MPANO BEACH FL 33062		_					
1			B4	City		Fi ⁱ	Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the above	e-named cor	poration submits this statement for the pu	rpose of cha	naina its reaistered	
office or r	egistered agent, or both, in the State of median with, and accept the obligat	f Florida. Such change was au	uthorized by	the corpora	poration submits this statement for the pu ition's board of directors. I hereby accept	the appointn	nent as registered	
1	Wild Mill, and Bocopy the opingal	013 01, 0001011 001.0300, 1101	naa Olalale.					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	E Registered Ag	ent signature req	ulred when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	[STD	X	Change Addition	
NAME	CENTORE, CARLO		1.2 NAME		CENTORE, CARLOS			
\$TREET ADDRESS	9 BAYVIEW PLACE		13 STREE	t address	9 BAYVIEW PLACE			
CITY-ST-ZIP	WEST HAVEN CT 06516		1.4 CiTY -	S1 - ZIP	WEST HAVEN, CT 06516			
TITLE	VTD	DELETE	2.1 TITLE		VD	(X	Change Additio	
NAME	RYDER, JANET		2.2 NAME	ļ	RYDER, JANET			
STREET ADDRESS	1360 S. OCEAN BLVD., #1506	}	23 STREE	1 ADDRESS	1360 S. OCEAN BLVD.,	#1506		
CITY-ST-ZIP	POMPANO BEACH FL 33062	T CSCA	2.4 CITY -	ST-ZIP	POMPANO BEACH, FL 330	62		
TITLE	8	DELETE	3.1 TITLE	-	P	Ĺ _X	Change Additio	
NAME	GAGNON, RAY JR.		3.2 NAME		GAGNON, RAY JR.			
STREET ADDRESS	27A RIVER ROAD			ADDRESS	27A RIVER ROAD			
CITY-ST-ZIP	CUNTON CT 06413	DELETE	3 4. C(TY - 4.1 TITLE	ST - ZIP	CLINTON, CT 06413		Change Additio	
		☐] DECENE		[-	Ц	outube [1] Vocitio	
NAME CTOTES ADDOCCO			4.2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 C(TY - 1	51-ZIP			Change Additio	
NAME			5.2 NAME			لــا	Charge [] ridding	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.5 STREE					
TITLE		DELETE	6 1 Title	D1 'EII'			Change Additio	
NAME			6.2 NAME	Ì			, <u> </u>	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			6.4 CITY - 1					
	by certify that the information supplied	with this filing is voluntarily fur-			alify for the exemption stated in Section 1	19.07(3)(k), F	lorida 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

JANET RYDER, VP Dayline 1954/958-9820