2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State
04-18-2000 90071 020 ***150.00

DOCUMENT # 182788

1. Entity Name

DICKERSON CONSTRUCTION CO., INC.

Principal Place of Business	Mailing Address
6740 S.W. 20TH CT. MIRAMAR FL 33023	6740 S.W. 20TH CT. MIRAMAR FL 33312-7926

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3388 SW 49 St	3388 SW 49 St
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Fort Lauderdale, FL	Fort Lauderdale, FL
City & State	City & State
33312-7926	33312-7926
Zip / Country	Zip / Country

4. FEI Number 59-0733749 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KOEBEL, RACHEL 6740 S.W. 20 COURT MIRAMAR FL 33023	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Rachel Koebel
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KOEBEL, RACHEL 6740 SW 20TH COURT MIRAMAR, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	- Address only - 3388 SW 49 St Ft. Lauderdale, FL 33312-7926	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KOEBEL, RACHEL 6740 S W 20TH COURT MIRAMAR, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 3388 SW 49 St Ft. Lauderdale FL 33312-7926	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS GIACOBBE, LILLIAN 2303 POLK ST APT 104 HOLLYWOOD, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	
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CR2E034 (9/99)

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rachel Koebel CORRECTED 4-11-00 954 989-8427
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #