

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90067 008 ***150.00

DOCUMENT # 438942

1. Entity Name
CROWN PROPERTIES & CONSTRUCTION CORP.

Principal Place of Business

**915 W. SUNRISE BLVD.
 FT. LAUDERDALE FL 33311**

Mailing Address

**915 W. SUNRISE BLVD.
 FT. LAUDERDALE FL 33311**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-2015263**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**WOODS, LINDA M
 915 W. SUNRISE BLVD
 FT. LAUDERDALE FL 33311**

7. Name and Address of New Registered Agent

Name: **RAY BROOKS**
 Street Address (P.O. Box Number is Not Acceptable): **915 W. Sunrise Blvd**
 City: **Ft. Lauderdale** FL Zip Code: **33311**

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

Ray Brooks
 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, 2002 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

TITLE: **PD** Delete
 NAME: **KASSAL, STANLEY**
 STREET ADDRESS: **393 CENTER ISLAND**
 CITY-ST-ZIP: **GOLDEN BCH FL**

TITLE: **SD** Delete
 NAME: **ROSENTHAL, ALAN S.**
 STREET ADDRESS: **2875 N.E. 191ST, STE. 500**
 CITY-ST-ZIP: **AVENTURA FL**

TITLE: **V** Delete
 NAME: **BROOKS, RAY**
 STREET ADDRESS: **10484 N.W. 3RD ST -**
 CITY-ST-ZIP: **PLANTATION FL**

TITLE: **VD** Delete
 NAME: **KASSAL, MICHEAL**
 STREET ADDRESS: **4740 N. 33RD COURT**
 CITY-ST-ZIP: **HOLLYWOOD FL 33021**

TITLE: **VD** Delete
 NAME: **KASSAL, PAUL**
 STREET ADDRESS: **3160 N. 36TH ST**
 CITY-ST-ZIP: **HOLLYWOOD FL 33021**

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS: **11675 WATERBEND CT.**
 CITY-ST-ZIP: **WELLINGTON, FL 33414**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Ray Brooks
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)