## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 448085 (1) 1. Corporation Name CONSTRUCTION COLLABORATIVE, INC.				I HARUK BIRAK DIRAK KASU ARURI HAI	HÎN BINL BIBLI BIBLI BIBLI BI	DJI BIANI BIBN 2021
rincipal Place of Business 211 SW 20TH STREET FT. LAUDERDALE FL 33315		Mailing Address 211 SW 20TH STREET FT. LAUDERDALE FL 33315				
Dringia al I				3. Date Incorporated or Qualified 04/11/1974	3a. Date of Last 02/01/19	Report
	Place of Business	2a. Mailing Address		4. FEI Number 59-1545253		Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.7	Not Applicable  5 Additional
City & Sta	te	City & State		6. Election Campaign Financing	Fee	Required
Zip	Country	28 Zip	Combi	Trust Fund Contribution	Adde	00 May Be ed to Fees
25 29			Country 30	This corporation has liability for Florida Statutes	intangible tax under s	199.032,
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F		
	VARREN E.		81 Name			
1401 N #45	E 9TH ST.		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)	
	JDERDALE FL 33304		83			
	PACIFICATE I E 00004		84 City		<b>—,</b> 85 Z	ip Code
Pursuant	to the provisions of Sections 607,0502 red agent, or both, in the State of Flori	and 607.1508, Florida Statu	toe the phone applied			
		1- 0	rest the above-tiarlied COtbo	Uration submits this statement for the run		
familiar w	ith, and accept the obligations of, Sect	da. Such change was authori ion 607.0505, Florida Statute	zed by the corporation's boas.	oration submits this statement for the pur ard of directors. I hereby accept the appo	ointment as registered	registered offici d agent. I am
ICH I MIRES I WY	in, and accept the obligations of, Sect	ion 607.0505, Florida Statute	S.	то от алоского. Тивгору ассерт гле аррг	rpose of changing its on the contract as registered	registered offici d agent. I am
NATURE.	th, and accept the obligations of, Sect Sgrature, typed or profied name of registered agent OFFICERS AN	on 607.0505, Florida Statute and title if applicable (N D DIRECTORS	zed by the corporation's box S.  OIE Registered Agent signature require	ed when reinstating)	DATE DATE	agent. I am
NATURE.	Signature, typed or printed name of registered agent OFFICERS ANI	on 607.0505, Florida Statute	OTE: Registered Agent agnature require  13. 1.1 TiTLE	то от алоского. Тивгору ассерт гле аррг	DATE DATE	agent. I am
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NATURE.	Signature, typed or printed name of registered agent OFFICERS ANI T COX, WARREN E 1401 NE 9TH ST., #45 FT. LAUDERDALE FL	on 607.0505, Florida Statute and title if applicable (N D DIRECTORS	S. OTE: Registered Agent signature require 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS	ed when reinstating)	DATE  DATE  CERS AND DIRECTO	DRS IN 12
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SIGNATURE:

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 954 527-7511