

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 489214**

1. Entity Name

CENTRAL BROWARD CONSTRUCTION, INC.**FILED****Jan 20, 2000 8:00 am**
Secretary of State

01-20-2000 90059 001 ***450.00

MAR 7 1999



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

931 N W 53 CT
FT LAUDERDALE FL 33309931 N W 53 CT
FT LAUDERDALE FL 33309-3106

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1630388

Applied For

Not Applicable

Zip

Country

Zip

Country

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**LORD, KENNETH I
2835 NE 35TH ST
FT. LAUDERDALE FL 33306

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

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 State10. 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	Change	Addition
PD	LORD, KENNETH I	2835 NE 35TH ST	FT LAUDERDALE, FL 00000	<input type="checkbox"/>	<input type="checkbox"/>
ST	LORD, KENNETH I	2835 NE 35TH ST	FT LAUDERDALE, FL 00000	<input type="checkbox"/>	<input type="checkbox"/>
EVP	NEWELL, ROBERT V.	10322 S.W. 50TH AVE.	COOPER CITY FL	<input type="checkbox"/>	<input type="checkbox"/>
D	LORD, GAYLE A.	2835 NE 35TH ST.	FT LAUDERDALE FL	<input type="checkbox"/>	<input type="checkbox"/>
VP	ECKENRODE, JAMES V.	17088 133RD TRAIL NORTH	JUPITER FL	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-00

Date

954-491-2272

Daytime Phone #

CR2E034 (9/99)