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0338594

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90058 021 ***150.00

DOCUMENT # 667106

1. Corporation Name

NATIONAL DEVELOPMENT & CONSTRUCTION CORP.

Principal Place of Business

855 S. FEDERAL HIGHWAY
SUITE 211
BOCA RATON FL 33432
US

Mailing Address

855 S. FEDERAL HIGHWAY
SUITE 211
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1980

4. FEI Number

59-2012733

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 1801 CLINT MOORE ROAD

Suite, Apt. #, etc.

22 SUITE #201

City & State

23 BOCA RATON, FLORIDA

Zip Country

24 33487

25 USA

2a. Mailing Address

26 1801 CLINT MOORE ROAD

Suite, Apt. #, etc.

27 SUITE #201

City & State

28 BOCA RATON, FLORIDA

Zip Country

29 33487

30 USA

9. Name and Address of Current Registered Agent

SLOSSBERG, SAUL A
855 S. FEDERAL HIGHWAY
SUITE #211
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name

SLOSSBERG, SAUL A.

82 Street Address (P.O. Box Number is Not Acceptable)

1801 CLINT MOORE ROAD, SUITE #201

83

84 City

BOCA RATON, FLORIDA

FL

85 Zip Code

33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE SAUL A. SLOSSBERG, PRESIDENT

4/9/99

DATE

Signature, typed or printed name of registered agent and title if applicable. (NOT if Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME SLOSSBERG, SAUL
STREET ADDRESS 811 SOUTH FEDERAL HIGHWAY #211
CITY-ST-ZIP BOCA RATON FL 33432

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME SLOSSBERG, SAUL
1.3 STREET ADDRESS 1801 CLINT MOORE ROAD, SUITE #201
1.4 CITY-ST-ZIP BOCA RATON, FLORIDA 33487

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE SAUL A. SLOSSBERG
PRESIDENT

4/9/99

Date

561-999-4343

Daytime Phone #

CR2E034 (11/98)