

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90437 041 ***150.00

DOCUMENT # 827173

1. Entity Name

ABRAMS CONSTRUCTION, INC.



Principal Place of Business

1945 THE EXCHANGE
STE 350
ATLANTA GA 30339
US

Mailing Address

1945 THE EXCHANGE
SUITE 350
ATLANTA GA 30339-2029
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1093980

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003, Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☐ Delete
NAME STOCK, T.F.
STREET ADDRESS 1945 THE EXCHG, STE 350
CITY-ST-ZIP ATLANTA GA 30309

TITLE SECRETARY ☒ Change ☐ Addition
NAME R.A. PATERNOSTRO
STREET ADDRESS 1945 THE EXCHANGE, STE 350
CITY-ST-ZIP ATLANTA, GA 30339

TITLE D ☐ Delete
NAME ABRAMS, ALAN R
STREET ADDRESS 1945 THE EXCHANGE, STE 400
CITY-ST-ZIP ATLANTA GA 30339

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

TITLE D ☐ Delete
NAME ABRAMS, J ANDREW
STREET ADDRESS 1945 THE EXCHANGE STE 300
CITY-ST-ZIP ATLANTA GA 30339

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

TITLE T ☐ Delete
NAME STOCK, T F
STREET ADDRESS 1945 THE EXCHG, STE 350
CITY-ST-ZIP ATLANTA, GA 0 30339

TITLE TREASURER ☒ Change ☐ Addition
NAME R.A. PATERNOSTRO
STREET ADDRESS 1945 THE EXCHANGE, STE 350
CITY-ST-ZIP ATLANTA, GA 30339

TITLE PD ☐ Delete
NAME MERRITT, B. M.
STREET ADDRESS 1945 THE EXCHG, STE 350
CITY-ST-ZIP ATLANTA GA 30339

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

TITLE VP ☐ Delete
NAME HODGES, GEORGE
STREET ADDRESS 1945 THE EXCHANGE, STE 350
CITY-ST-ZIP ATLANTA GA 30339

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

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered

SIGNATURE:

R.A. Paternostro
CFO-Secretary-Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/03

Date

770-952-3555

Daytime Phone #

CR2E034 (10/02)