

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56607

FILED
Apr 30, 2010
Secretary of State

Entity Name: LEVINE CONSTRUCTION CORP.

Current Principal Place of Business:

% LAWRENCE A. LEVINE
790 EAST BROWARD BLVD, SUITE 302
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

% LAWRENCE A. LEVINE
100 SOUTH PINE ISLAND ROAD STE 128
PLANTATION, FL 33324 US

Current Mailing Address:

% LAWRENCE A. LEVINE
790 EAST BROWARD BLVD, SUITE 302
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

% LAWRENCE A. LEVINE
100 SOUTH PINE ISLAND ROAD STE 128
PLANTATION, FL 33324 US

FEI Number: 59-2138996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, LAWRENCE A.
790 EAST BROWARD BOULEVARD
SUITE 302
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

LEVINE, LAWRENCE A.
100 SOUTH PINE ISLAND ROAD
SUITE 128
PLANTATION, FL 33324 US

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:

04/30/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: LEVINE, LAWRENCE A
Address: 100 SOUTH PINE ISLAND ROAD STE 128
City-St-Zip: PLANTATION, FL 33324

Title: VD
Name: LEVINE, HOWARD A
Address: 100 SOUTH PINE ISLAND ROAD STE 128
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LAWRENCE A LEVINE

PD

04/30/2010

Electronic Signature of Signing Officer or Director

Date