

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90018 020 ***150.00

DOCUMENT # F96000000529

1. Entity Name

CONSTRUCTION ASPEX, INC.

Principal Place of Business

**3265 GATEWAY RD
 STE 650
 BROOKFIELD WI 53045**

Mailing Address

**3265 GATEWAY RD
 STE 650
 BROOKFIELD WI 53045**

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 **39-1654984**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**SHEVIN, ARNOLD
 2 DATRAN CENTER, STE 1528
 9130 SOUTH DADELAND BLVD
 MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name

KENNETH L. BARNETT

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

14502 N. DALE MARY

Suite 329

City

TAMPA

FL

Zip Code

33618

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

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

Kenneth L. Barnett
 (NOTE: Registered Agent signature required when reinstating)

4/13/01
 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **KARL, KENNETH B**
 STREET ADDRESS **9130 S. DADELAND BLVD, #1528**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **PS** ☒ Delete
 NAME **GRAHL, JEFFREY**
 STREET ADDRESS **3315 N. 124TH ST., #E**
 CITY-ST-ZIP **BROOKFIELD WI 53005**

TITLE **TS** ☒ Delete
 NAME **SHEVIN, ARNOLD**
 STREET ADDRESS **2 DATRAN CTR STE 1528 9130 S DADELAND BLVD**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **BARNETT, KENNETH L.**
 STREET ADDRESS **14502 N. DALE MARY STE 329**
 CITY-ST-ZIP **TAMPA, FL 33618**

TITLE **P** ☒ Change ☐ Addition
 NAME **BARNETT, KENNETH L.**
 STREET ADDRESS **14502 N. DALE MARY STE 329**
 CITY-ST-ZIP **TAMPA, FL 33618**

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

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

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

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

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:

Kenneth L. Barnett
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/13/01

Daytime Phone #

8139685547

CR2E034 (10/00)