2002 UNIFORM BUSINESS REPORT (UBR)

Jan 23, 2002 8:00 am Secretary of State DOCUMENT # G79875 1. Entity Name 01-23-2002 90031 009 ***150.00 FELNER CONSTRUCTION INDUSTRIES, INC. Principal Place of Business Mailing Address 4236 PINE HOLLOW CIRCLE 4236 PINE HOLLOW CIRCLE GREENACRES FL 33463 **GREENACRES FL 33463** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2639340 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FELNER, JEFFREY S Street Address (P.O. Box Number is Not Acceptable) 250 SE 10TH STREET 4236 PINE HOLLOW CIRCLE **GREENACRES FL 33463** Zip Code 33483 DELRAY BEACH changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity SIGNATURE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change ☐ Delete TITLE NAME FELNER, JEFFREY S NAME **4236 PINE HOLLOW CIRCLE** STREET ADDRESS 250 SE 10TH STREET STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33483 CITY-ST **GREENACRES FL 33463** ☐ Delete Change Addition TITLE NAME FELNER, CAROL STREET ADDRESS STREET ADDRESS 4236 PINE HOLLOW CIRCLE 250 SE 10TH STREET CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH, FL 34483 **GREENACRES FL 33463** ☐ Defete TITI F ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 the receiver or the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment wit

all other like empowered

FILED

(9/01) CR2E034