## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jan 24, 2001 8:00 am Secretary of State **DOCUMENT # G82827** 1. Entity Name JJW CONSTRUCTION, INC. 01-24-2001 90032 048 \*\*\*158.75 Principal Place of Business Mailing Address 1670 W MCNAB ROAD 1670 W MCNAB ROAD FT. LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2364113 Not Applicable \$8.75 Additional 7ip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WELBAUM, R. EARL Street Address (P.O. Box Number is Not Acceptable) 901 PONCE DELEON BV PENTHOUSE STE MIAMI FL 33134-0009 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE WALSH, JOSEPH J. NAME STREET ADDRESS STREET ADDRESS 1670 W MCNAB ROAD CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Change ☐ Addition TITLE DP □ Detete TITLE NAME WALSH, THOMAS F. NAME STREET ADDRESS STREET ADDRESS 731 NW 101ST TERRACE City-St-7iP CITY-ST-ZIP PLANTATION FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE GOFFAR, DENNIS L. NAME NAME 3233 NE 34TH STREET, #1216 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition Delete TITLE HEMMINGER, MICHAEL J NAME NAME STREET ADDRESS 4860 NORTHEAST 18 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE DONALD G DOLLAR NAME NAME STREET ADDRESS 1670 W MCNAB ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Addition TITLE~~== ☐ Delete NAME NAME ----STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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 are sustee 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 a address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAM

DENNIS L. GOFFIER 1/9 G OFFICER OR DIRECTOR

FILED