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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J23759 1. Corporation Name

CONSTRUCTION PLUS, INC.

| Principal Place | e of Business | Mailing Address | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
|---|--|--------------------------------------|---|--|------------------------------------|
| -8019 FLORAL DR BOX 6605 | | | | | |
| SPRINGHILL FL 34607 | | SPRING HILL FL 34611 | | DO NOT WRITE IN THIS SPACE | |
| | | -U3 - | | Date Incorporated or Qualifed | TE IIV THIS STAGE |
| | | | | 07/11/1986 | (|
| 2 Principal Pl | lane of Rusiness | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 2. Principal Place of Business 21. B.500 Hearthere Blue 26 Same | | | | 59-2951719 | Not Applicable |
| Suite, Apt. | | Auite. Apt. #. etc. | | | \$8.75 Additional |
| 22 | ,, 0.0. | 27 | | 5. Certifcate of Status Desired | Fee Required |
| City & State City & State | | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 BROOKSVILLE FLA 28 | | | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes the cur | rent year Intangible |
| 24 3461 | 25 | 29 | 30 | Personal Property Tax. | ☐ Yes ☐ No |
| | 9. Name and Address of Currer | nt Registered Agent | | 10. Name and Address of New | Registered Agent |
| | | | | SAME | |
| SASLAW, GERLAD E | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| -8019 FLORAL DRIVE | | | | 500 HEATHER | Blud. |
| SPRINGHILL FL 34607 | | | 83 | | |
| | | | 84 City | | 85 Zip Code |
| | | | Theor | Ksville FL. | FL 3/6/3 |
| 11. Pursuant | to the provisions of Sections 607.050 | 2 and 607.1508, Florida Statutes | s the above-named co | rporation submits this statement for the | purpose of changing its registered |
| office or re agent. I a | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was aut | tnonzed by the corpora da Statutes. | ation's board of directors. I hereby acce | pr trie appointment as registered |
| SIGNATURE | Carral OS | laslaw | | Z | 109/99 |
| SIGNATURE | Signature, typed or printed name of registered age | nt and title if applicable. (NOTE: F | Registered Agent signature requ | | DATE |
| 12. | | ID DIRECTORS | 13. | ADDITIONS/CHANGES TO OF | FICERS AND DIRECTORS IN 12 |
| TITLE | PD | ☐ DELETE | . 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | SASLAW, GERALD E. | | 1.2 NAME | Andrew T | 21.1.1 |
| STREET ADDRESS | -8019-FLORAL-DRIVE | | 1.3 STREET ADDRESS | 8500 HEATHER TO BROOKS VILLE PO | SLUC I |
| CITY-ST-ZIP | SPRINGHILL FL | | | BROOKS VILLE FO | <u> </u> |
| TITLE | VP | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | Louis SALVATO | | 2.2 NAME | | 1 |
| STREET ADDRESS | 1431 BOLGER 40 | Æ. | 2.3 STREET ADDRESS | | · · |
| CITY-ST-ZIP | LOUIS SALVATO 1431 BOLGER AC Spring Hill, FLA | -34607 | 2.4 CITY-ST-ZIP | the plant of the p | |
| TITLE | | ' ☐ DELETE | 3.1 TITLE | _ | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | At- | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | • | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS