

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L39277** (3)

1. Corporation Name

INTEGRAL CONSTRUCTION OF BROWARD, INC.



Principal Place of Business: **3469 NW 55TH ST, 8360 WEST OAKLAND PARK BOULEVARD, #203 FT. LAUDERDALE FL 33309 US**
Mailing Address: **3469 NW 55TH ST, 8360 WEST OAKLAND PARK BOULEVARD, #203 FT. LAUDERDALE FL 33309 US**

3. Date Incorporated or Qualified: **01/02/1990**
3a. Date of Last Report: **04/28/1995**

2. Principal Place of Business: **21 3469 NW 55th St.**
2a. Mailing Address: **26 3469 NW 55th St.**

4. FEI Number: **65-0165369**
Applied For: Not Applicable

22. City & State: **23 Ft. Lauderdale, FL**
27. City & State: **28 Ft. Lauderdale, FL**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

24. Zip: **33309** 25. Broward
29. Zip: **33309** 30. Broward

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **ROSENBERG, ARTHUR, 4875 N. FEDERAL HIGHWAY, 7TH FLOOR, FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name: **Scott J. Senft**
82 Street Address (P.O. Box Number is Not Acceptable): **126 S. Federal Highway, #208**
83
84 City: **Dania** 85 Zip Code: **FL 33004**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* 4/26/96

12. OFFICERS AND DIRECTORS		DELETE
TITLE	VSD	<input type="checkbox"/>
NAME	STECKER, WILLIAM	
STREET ADDRESS	5581 S.W.7TH ST.	
CITY-ST-ZIP	PLANTATION FL 33317	
TITLE	PDT	<input type="checkbox"/>
NAME	COHEN, FRED	
STREET ADDRESS	7158 NW 49TH PLACE	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		CHANGE	ADDITION
11 TITLE	V	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 NAME	Stecker, William		
13 STREET ADDRESS	5581 SW 7th St.		
14 CITY-ST-ZIP	Plantation, FL 33317		
21 TITLE	P	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22 NAME	Cohen, Fred		
23 STREET ADDRESS	7158 NW 49th Place		
24 CITY-ST-ZIP	Lauderhill, FL 33319		
31 TITLE	S	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32 NAME	Stecker, Diane		
33 STREET ADDRESS	5581 SW 7th St.		
34 CITY-ST-ZIP	Plantation, FL 33317		
41 TITLE	T	<input type="checkbox"/>	<input checked="" type="checkbox"/>
42 NAME	Cohen, Barbara		
43 STREET ADDRESS	7158 NW 49th Place		
44 CITY-ST-ZIP	Lauderhill, FL 33319		
51 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
52 NAME			
53 STREET ADDRESS	900001847539		
54 CITY-ST-ZIP	-06/03/96--01029--004		
	***200.00		
61 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **FRED COHEN**
DATE: **4-4-96** 954-485-1110

CR2E034 (12/95)