2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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1. Entity Name

CONSTRUCTION SOURCE LC



FILED Feb 20, 2003 8:00 am Secretary of State 02-20-2003 90019 037 ****50.00

	IOCTION SOUNCE, L.C.		\		'				
Principal Place of Business 21332 WEST DIXIE HIGHWAY NORTH MIAM! BEACH FL 33180			Mailing Address 21332 WEST DIXIE HIGHWAY NORTH MIAMI BEACH FL 33180		O T O T O T O T O T O T O T O T O T O T				
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- Trittelpai	Trace of Business	3. Mailing Address			1100				
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.			1	☐ CHECK	HERE IF M	IAKING CHANGI	=9
City & Sta	ate	City & State		<u>.</u>	4. FEI Nur				Applied For
Zip	Country	Zip	Country				· · · · · · · · · · · · · · · · · · ·		Not Applicab
		,	L		5. Certifica	ate of Status De	sired [\$5:00-/ Fee Requ	Additional ired
	6. Name and Address of Curre	ent Registered Agent			7. Name a	nd Address of	New Regis	tered Agent	
	TES, MARC A ESQ			Name				-	
	31 West Hillsboro Blvd. Te 403		S	Street Address (F	P.O. Box Num	ber is Not Acce	ptable)		 _
DEE	ERFIELD BEACH FL 33442				-			-	···
				City				FL Zip Co	
8. The above	e named entity submits this statement ations of registered agent.	for the purpose of changing it	ts registered o	ffice or registere	ed agent, or b	ooth, in the State	of Florida.	l am familiar with	and accept
	_							· Cott (Cottinial) 4910	i, and accept
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TE: Begintered Age				·	DATE	
				MI Signature required v					
				nt signature required v	when reinstating)	<u> </u>			
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11. indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE