

2003

## 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 13, 2003 8:00 am**  
**Secretary of State**

05-13-2003 90054 038 \*\*\*158.75

DOCUMENT # M02639

1. Entity Name

ASSOCIATED CONSTRUCTION, INC.

Did Not Receive  
 2003 Form

Principal Place of Business

1181 S ROGERS CIR  
 STE 22  
 BOCA RATON FL 33487  
 US

Mailing Address

1181 S ROGERS CIR  
 STE 22  
 BOCA RATON FL 33487  
 US

2. Principal Place of Business

1120 Holland Drive

3. Mailing Address

Same as #2

Suite, Apt. #, etc.

6

Suite, Apt. #, etc.

City &amp; State

Boca Raton, FL

City &amp; State

Boca Raton, FL

4. FEI Number

65-0247600

Applied For

Not Applicable

Zip

33487

Country

USA

Zip

33487

Country

USA

5. Certificate of Status Desired

X

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

BRANDT, ALAN C JR  
 150 S PINE ISLAND RD  
 SUITE 400  
 FT LAUDERDALE FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
 NAME ST  
 STREET ADDRESS DEL VECCHIO, JACQUELINE  
 CITY-ST-ZIP 1181 S. ROGERS CIR., STE 22  
 BOCA RATON FL 33487

TITLE ☐ Delete  
 NAME P  
 STREET ADDRESS DEL VECCHIO, PAUL J  
 CITY-ST-ZIP 1181 S. ROGERS CIR., STE 22  
 BOCA RATON FL 33487

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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; that I am duly elected or appointed; and that I am duly qualified 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

Jacqueline Del Vecchio  
 Jacqueline Del Vecchio

5/13/03

4/30/02

561-241-1711

CF2F034 (9/01)