2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000006957

ROWE CONSTRUCTION CORP.

Mailing Address

3857 TURTLE RUN BLVD.

SUITE 2132 CORAL SPRINGS FL 33067

3857 TURTLE RUN BLVD. SUITE 2132 CORAL SPRINGS FL 33067

2. Principal Place of Business	3. Mailing Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			
City & State	City & State			
7:0		••••		

FILED
Mar 01, 2001 8:00 am
Secretary of State
03-01-2001 90016 035 ***150.00



2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN TH	HIS SPACE			
City & State City & State		*****	4. FEI Number 57-/09 /389		plied For t Applicable			
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Add	itional		
	6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Register				
ROWE, RONALD R 3857 TURTLE RUN BLVD. SUITE 2132 CORAL SPRINGS FL 33067			Name Street Add	Name Street Address (P.O. Box Number is Not Acceptable)				
			City		Zip Code	Э		
8. The above	named entity submits this statement	for the purpose of changir	ng its registered office or re	egistered agent, or both, in the State of Florida.				
SIGNATURE .	Signature, typed or printed name of registered age	int and title if applicable.	(NOTE: Registered Agent signature	required when reinstating)	ATE			
Tax filing requirement and elects to do so. After MAY 1, 2001		OW!!! FEE IS \$150.00 1, 2001 Fee will be \$550 ayable to Department of	10. Election Campaign Financing Trust Fund Contribution	_ Ψυ.υ	0 May Be I to Fees			
11,	OFFICERS AN	D DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROWE, RONALD R 3857 TURTLE RUN BLVD., SUI CORAL SPRINGS FL 33067	☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition		
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		☐ Change	Addition		

of the corporation or the receiver of trustee 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 an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR