

2001 UNIFORM BUSINESS REPORT (UBR)

2/7

FILED
Mar 02, 2001 8:00 am
Secretary of State

02-07-2001 90170 020 ***150.00

DOCUMENT # P00000044544

1. Entity Name

AGC CONSTRUCTION SERVICES, INC.

Principal Place of Business

9690 W. SAMPLE ROAD
 SUITE #202
 CORAL SPRINGS FL 33065

Mailing Address

9690 W. SAMPLE ROAD
 SUITE #202
 CORAL SPRINGS FL 33065

2. Principal Place of Business

AGC Construction Services

3. Mailing Address

Same

Suite, Apt. #, etc.

PO Box 101074

Suite, Apt. #, etc.

City & State

FT. Lauderdale FL

City & State

4. FEI Number

65-0441978

Applied For

Not Applicable

Zip

33310

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TZUCANOW, GREG
9690 W. SAMPLE ROAD
SUITE #202
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name **Gregory A. Tzucanow**

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

2618 Flamingo Lane

City

FT. Laud

FL

Zip Code

33312

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, 2001 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 **President** ☐ Delete
 NAME **Tzucanow, Greg**
 STREET ADDRESS **2618 Flamingo Lane**
 CITY-ST-ZIP **FT. Lauderdale, FL 33312**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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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
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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 or the receiver or 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregory A. Tzucanow

Date

3 FEB 2001 (954) 7766551

Daytime Phone #

CR2034 (10/00)