2003 FOR PROFIT CORPORATION

HOLLYWOOD FL 33020



FILED Apr 07, 2003 8:00 am Secretary of State

04-07-2003 91027 034 ***150.00

JOCUMENT# F . Entity Name	200000000799			
CEDAR BROOK CONSTRU	CTION, INC.			
Principal Place of Business	Mailing Address			
1619 N. 29TH COURT	1619 N. 29TH COURT			

HOLLYWOOD FL 33020

Principal Place of Business 3. Mailing Address			T I DERIKADA 311 DERIKI DERIK DERIK EDRIK REKAN DERIK DERIK DERIK DERIK I DERIK I DERIK 10/10 40/1 100/1					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. f	FEI Number 65-1023689		plied For t Applicable	
Zìp	Country	Zìp	Country	5. (Certificate of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Curren	t Registered Agent	- 11	7. N	lame and Address of New Registered	Agent		
MULLENSKI, RICHARD			Name	Name				
1619 N. 29TH COURT		Street Add	Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWO	OOD FL 33020							
	master en		City		FL	Zip Code	9	
the obligat	named entity submits this statement fi ions of registered agent.	or the purpose of changing its r	registered office or re	gistered ag	ent, or both, in the State of Florida. I am	familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agen	and title if applicable. (NOTE:	: Registered Agent signature	required when re	instating) DATE			
ُ ۾ ُ Afte	ILE NOW!!!; FEE IS \$150.00 May 1, 2003; Fee will be \$550.00 Payable to Florida Department of					Added	0 May Be I to Fees	
10.	OFFICERS AND	DIRECTORS	11.	AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULLENSKI, RICHARD 1619 N. 29TH COURT HOLLYWOOD FL 33020	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS CITY ST. 7IP			☐ Change	☐ Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: