2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2003 8:00 am
Secretary of State
06-03-2003 90039 011 ***150.00

DOCUMENT # P01000030821

1. Entity Name
DETAILS DEMOLITION INC.

Principal Place of Business	Mailing Address
4910 NW 77TH COURT POMPANO BEACH, FL 33073	4910 NW 77TH COURT POMPANO BEACH, FL 33073

2. Principal Place of Business	3. Mailing Address
3840 W. Hillsboro Blvd	3840 W. Hillsboro Blvd.
Suite, Apt. #, etc. Deerfield Beach	Suite, Apt. #, etc. Deerfield Beach
City & State FL	City & State FL
Zip 33442 Country Broward	Zip 33442 Country Broward

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0919359 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BUSINESS FILINGS INCORPORATED 1000 WEST AVENUE SUITE 1114 MIAMI BEACH, FL 33139	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CARNALI, BRUCE	NAME	
STREET ADDRESS	4910 NW 77TH COURT	STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH, FL 33073	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E034 (10/02)

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: Bruce Carnali 5/27/03 (954) 494-2349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
80124089
P0100003082 1

DETAILS DEMOLITION INC.
3840 WEST HILLSBORO BEACH BLVD. #132
DEERFIELD BEACH, FL. 33442
PHONE : 954-494-2349 FAX: 954-426-0740
Commercial and Residential
Certified Demolition Contractor
Insured (Liability and Workers Comp)

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahasee, Fl. 32302-1500

To whom it may concern:

I did not receive my form this year, therefore I called and was told to submit this letter and a check for $150.00. Also please see attached enclosed form.

Thank you for your time.

Bruce Carnali
Owner