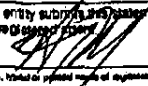
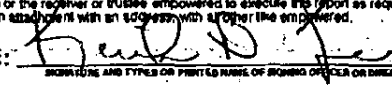


FILED
May 12, 2003 8:00 am
Secretary of State

04-18-2003 90175 005 ***150.00

2003-FOR-PROFIT-CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000084877		
1. Entity Name CONSTRUCTION SERVICES & INSTALLATIONS, INC.		
Principal Place of Business 1897 HIGH ST LONGWOOD, FL 32750		Mailing Address 1897 HIGH ST LONGWOOD, FL 32750
2. Principal Place of Business 2840 W. Orange Ave. Suite, Apt. #, etc.		3. Mailing Address 2840 W. Orange Ave. Suite, Apt. #, etc.
City & State Apopka FL		City & State Apopka FL
Zip 32703	Country ORANGE	Zip 32703
4. FEI Number 59-3740878		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BIFERIE, ROBERT L 1870 PROVIDENCE BLVD STE K DELTONA, FL 32726		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) 301 N. PINE MEADOWS DR. SUITE # A City DEBARY FL Zip Code 32713
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, Printed or printed name of registered agent and title if applicable		DATE 4/14/03 DATE
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		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 registered 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 a former line empowered.		
SIGNATURE:  SIGNATURE AND TITLE OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR		

55039955



☒ CHECK HERE IF MAKING CHANGES

CR2003A (10/02)