2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000090316

1501 COLLINS AVE, 3RD FL

MIAMI EACH, FL 33139

Address: City-St-Zip:

Entity Name: CONSTRUCTA HOSPITALITY SERVICES, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current P	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	LINS AVE, 3RD FL CH, FL 33139			
Current N	lailing Address:	New Mailing Addre	New Mailing Address:	
	LINS AVE, 3RD FL CH, FL 33139			
FEI Number	: FEI Number Applied F	or () FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		gent: Name and Address	Name and Address of New Registered Agent:	
KWIAT, ANDY 1501 COLLINS AVE, 3RD FL MIAMI EACH, FL 33139			KWIAT, ANDREW 1501 COLLINS AVE, 3RD FL MIAMI EACH, FL 33139	
	e named entity submits this statemen e of Florida.	t for the purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE: ANDREW KWIAT		04/29/2002	
	Electronic Signature of Regis	tered Agent	Date	
	ation is eligible to satisfy its Intangible Ta mpaign Financing Trust Fund Contributio	x filing requirement and elects to do so (X). n ().		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete PIETRI, MARC 1501 COLLINS AVE, 3RD FL MIAMI EACH, FL 33139	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete FAZILLEAU, BRIC 1501 COLLINS AVE, 3RD FL MIAMI EACH, FL 33139	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () Delete MEUNIER, JEAN MARC	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JEAN MARC MEUNIER D 04/29/2002