FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Sep 08, 2002 8:00 am Secretary of State 09-08-2002 90130 047 ***150.00

DOCUMENT # PO1000100 724 ~	7
STATUS CONSTRUCTION MANAGEMENT,	IN

STAT	us Construct	TION MANY	4GEME	≥NT,=	EA:		
•	DO NOT WRITE	IN THIS S	PACE				
2. Principal Place of Business 3. Mailing Address				871004			
368 Woodshire Cane SAME			<u>-</u>				
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & Stat	te ,	City & State			4. FEI Number	Applied For	
NAPL Zip	Country	Zip	Country		14-184 LTS	Not Applicable \$8.75 Additional	
3410	5 USA	219	Country		5. Certificate of Status Desired	Fee Required	
			No		7. Name and Address of Current Registe	ered Agent	
. Link Albert and June 1994, and the same	DO NOT W	DITE	140	Name Khalil Khalil			
			Str	Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE				8930 Bay Colony Dr. #401.			
			Cit	Napl	 	Zip Code	
8 The above	named entity submits this statement for	r the purpose of changing it	e registered offi	• "	ed agent, or both, in the State of Florida.	<u>- 1 34108</u>	
SIGNATURE	KhallKhok	K	HALIL TE: Registered Agent	- K'	HALIL SE	PT4,02	
		lanuamid I	May 1 Fee is	-	when reinstating) DA	·	
	pration is eligible to satisfy its Intangible requirement and elects to do so.	After May	/ 1. Fee is \$5	50.00	10. Election Campaign Financing	\$5.00 May Be	
_	ria on back)	Make Check Paya	d UBR is \$6° ble to Depart	1.25 ment of Stat	Trust Fund Contribution.	Added to Fees	
11.	OFFICERS AND I						
TITLE V V S	Khalil Khalil 8930 Bay Colony D		TITLE				
NAME STREET ADDRESS	8930 Bay Colony I)r.#401	NAME STREET ADD	RESS	•	·	
CITY-ST-ZIP	Naples FL 3410		CITY-ST-ZIF	1		•	
TITLE QT	Arno Devilliers.		TITLE				
NAME STREET ADDRESS	Arno Devilliers. 368 woodshire	Lane B12	NAME OTREET ADD	2505	•		
CITY-ST-ZIP	Naples, A 34109	÷	STREET ADDI				
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NAME ;			TITLE		IN THIS SPA	4CE	
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CITY-ST-7IP			CITY CT. 7ID	1		l l	

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 on an attachment with an address, with all othernike empowered.

SIGNATURE:

9/02/02

Uniform Business Report

Division of Corporations PO Box 1500 Tallahassee, Fl 32302-1500

Sir/Madam

Uniform Business Report

We again apologize for the late submission of this UBR. We explained the non-receipt of the form to you by telephone and was granted a \$150 penalty which is enclosed herewith.

Arno de Villiers (President)