FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 17, 2001 8:00 am Secretary of State **DOCUMENT # P14057** AACON CONTRACTING CO. INC. 04-17-2001 90132 048 ***150.00 Principal Place of Business Mailing Address 4000 SW 130TH AVE. 4000 SW 130TH AVE UUU37802 C.D. 153 C.D. 153 MIRAMAR FL 33027 MIRAMAR FL 33027 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 11-1501018 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent H & W REGISTERED AGENTS INC. Street Address (P.O. Box Number is Not Acceptable) 1110 BRICKELL AVENUE, PENTHOUSE MIAMI FL 33131 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) Delete TITLE ☐ Change ☐ Addition TITLE NAME MCGARRY, MICHAEL NAME STREET ADDRESS STREET ADDRESS 67 VREELAND AVE. CITY-ST-ZIP CITY-ST-ZIP RUTHERFORD N. TITLE ☐ Delete TITLE Change ☐ Addition NAME CADILLAC, R. T. NAME STREET ADDRESS 4000 SW 130 AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition CADILLAC, MARYJO NAME NAME STREET ADDRESS STREET ADDRESS 4000 SW 130 AVE CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition MCGARRY, ELEANOR NAME STREET ADDRESS 13101 SW 11 CT STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition CANI/AC NAME NAME 4000 SW 130 Ave STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.