## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 17, 2001 8:00 am Secretary of State **DOCUMENT # P18862** 05-17-2001 90400 001 \*\*\*150.00 **BEZTAK CONSTRUCTION COMPANY** Principal Place of Business Mailing Address 31731 NORTHWESTERN HIGHWAY 31731 NORTHWESTERN HIGHWAY 657200 250W FARMINGTON HILLS MI 48334-1654 FARMINGTON HILLS MI 48334-1654 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 38-1976710 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LUPTAK, PAOLA M Street Address (P.O. Box Number is Not Acceptable) 4700 NW BOCA RATON BLVD 4TH FLOOR **BOCA RATON FL 33431** Zip Code City FL 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PTD ☐ Delete ☐ Addition TITLE TITLE BEZNOS, MAURICE NAME NAME STREET ADDRESS 31731 NW HWY, STE 250W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **FARMINGTON HILLS MI** TITLE ☐ Change Addition ☐ Delete TITLE BEZNOS, NORMAN NAME NAME STREET ADDRESS 31731 NW HWY, 250W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **FARMINGTON HILLS MI** TITLE ☐ Delete TITLE [ ] Change ☐ Addition BEZNOS, NORMAN NAME NAME STREET ADDRESS 31731 NW HWY, 250 W STREET ADDRESS CITY-ST-ZIP FARMINGTON HILLS FL CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME

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 one repowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ Delete

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

FILED

Change

Addition