

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 04, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P18862**

1. Entity Name  
**BEZTAK CONSTRUCTION COMPANY**



Principal Place of Business

31731 NORTHWESTERN HIGHWAY  
250W  
FARMINGTON HILLS, MI 48334-1654 US

Mailing Address

31731 NORTHWESTERN HIGHWAY  
250W  
FARMINGTON HILLS, MI 48334-1654 US



01082004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**38-1976710**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

LUPTAK, PAOLA M  
4700 NW BOCA RATON BLVD  
4TH FLOOR  
BOCA RATON, FL 33431

**DO NOT WRITE  
IN THIS SPACE**

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PTD  
BEZNOS, MAURICE  
31731 NW HWY, STE 250W  
FARMINGTON HILLS, MI

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VSD  
BEZNOS, NORMAN  
31731 NW HWY, 250W  
FARMINGTON HILLS, MI

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
V  
BEZNOS, NORMAN  
31731 NW HWY, 250 W  
FARMINGTON HILLS, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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05/05/04-80052-020 150.00

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IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Maurice J. Beznos*  
**Maurice J. Beznos**

Date

*4/14/04*  
**4/14/04**

Daytime Phone #