2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAM

Jun 09, 2000 8:00 am **DOCUMENT # P41152** 1. Entity Name **Secretary of State** NORTH PARK CONSTRUCTION, INC. 06-09-2000 90012 023 ***550.00 Principal Place of Business Mailing Address 654 THOMAS AVENUE 654 THOMAS AVENUE **ROCHESTER NY 14617 ROCHESTER NY 14617-1435** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 16-1424790 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent D'ARPINO, JOHN A. Street Address (P.O. Box Number is Not Acceptable) 2780 N.E. 8TH CT. POMPANO BEACH FL 33062 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 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Delete TITLE Change D'ARPINO, JOHN A NAME NAME STREET ADDRESS STREET ADDRESS 341 SWEET ACRES DR CITY-ST-ZIP CITY-ST-7IP **ROCHESTER NY** ☐ Delete TITLE Change Addition TITLE NAME D'ARPINO, ANTONIO NAME STREET ADDRESS STREET ADDRESS 654 THOMAS AVENUE CITY-ST-ZIP CITY-ST-ZIP ROCHESTER NY ☐ Delete TITLE Addition TITLE D'ARPINO, ANGELO NAME NAME STREET ADDRESS STREET ADDRESS 654 THOMAS AVENUE CITY-ST-ZIP CITY-ST-ZIP **ROCHESTER NY** ☐ Delete TITLE ☐ Change Addition TITLE NAME D'ARPINO, ANNA NAME STREET ADDRESS STREET ADDRESS 654 THOMAS AVENUE CITY-ST-7IP CITY-ST-ZIP **ROCHESTER NY** Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 trusted employered to effect this report as fequired by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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