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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Apr 24 1997 8:00am

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DIVISION OF CORPORATIONS

1997

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R.I.Z. CONSTRUCTION, INC.

Principal Place of Business Mailing Address 5121 S.W. 90TH AVENUE 5245 SW 90TH AVE. COOPER CITY FL 33328-5110 **COOPER CITY FL 33328** 3. Date Incorporated or Qualified 3a. Date of Last Report 02/10/1993 04/22/1996 2. Principal Place of Business 21. 9124 Griffin Road 2a. Mailing Address 4. FEI Number Applied For 65-0384918 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip This corporation has liability for intangible tax under s. 199.032. Yes No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BUTLER, BRUCE \$** Butler, Bruce S. **5245 SW 90TH AVE** Address (P.O. Box Number is Not Acceptable) 9709 WEST Sample Road 82 COOPER CITY FL 33328 83 84 City Coral Springs 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE ☐ Change Addition ST 1.1 TOLE THEE Rizzi, Daniel 5245 S.W. 90 Ave. RIZZI, DANIEL NAME 10 NAME 5245 SW 90 AVE 1.3 STREET ADDRESS STREET ADDRESS Cooper City, FL 33328 COOPER CITY FL 1.4 CITY - ST - ZIP CHTY-ST-7/F Change Addition DELETE 2.1 TITLE THE RIZZI, ELLEN R 2.2 NAME NAME 1. 1 5245 SW 90 AV 2.3 STREET ADDRESS STREET ADDRESS COOPER CITY FL CHY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TOTLE TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP City-St-7IP DELETE ___ Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-SI-7P DELETE [Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CHY-S1-2IP DELETE Change Addition 6.1 TIFLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual 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