

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 16 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000041705 (3)

1. Corporation Name

CAMBRIDGE CUSTOM HOMES, INC.

Principal Place of Business

12346 WILES ROAD
CORAL SPRINGS FL 33076

Mailing Address

12346 WILES ROAD
CORAL SPRINGS FL 33076

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/14/1993

3a. Date of Last Report

03/21/1994

4. FEI Number

65-0416431

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 12356 Wiles Road

2a. Mailing Address

26 12356 Wiles Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BERTOLAMI, PAUL
12346 WILES ROAD
CORAL SPRINGS FL 33076

10. Name and Address of Now Registered Agent

81 Name

Andrew Blas

82 Street Address (P.O. Box Number is Not Acceptable)

1900 Glades Road

83 Suite, Apt. #, etc.

Suite 445

84 City

Boca Raton, FL

85 Zip Code

33434

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

3/3/95

12. OFFICERS AND DIRECTORS

TITLE P
NAME BERTOLAMI, CHRISTOPHER
STREET ADDRESS 12346 WILES ROAD
CITY-ST-ZIP CORAL SPRING-FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

President

1.3 STREET ADDRESS

Bertolami, Paul

1.4 CITY-ST-ZIP

12356 Wiles Road
Coral Springs, FL 33076

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 as required, or on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

2/10/95

305/753-1877