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PROFIT CORPORATION ANNUAL REPORT

1997

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SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000049992 (9)

STAN CELENSKI GENERAL CONTRACTING, INC.

Principal Place of Business 11751 ROYAL PALM BLVD 203 CORAL SPRINGS FL 33065 US 2. Principal Place of Business 21 S J 30 M/ IS Pol. OC. Suite, Apt. #, etc 22 City & State 23 CORAL SPRINGS Zip Country		Mailing Address 11751 ROYAL PALM BLVD 203 CORAL SPRINGS FL 33065-7327 US 2a. Mailing Address 26 SJ30 Whis fee DR. Suite, Apt. #, etc. 27 City & State 28 CORAL SPRINGJ Zip Country		3. Date Incorporated or Qualified 07/16/1993 4. FEI Number 65-0423954 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for intangible tax under s. 199.032,		
24 3 301	67 25 BROWNED	29 33067	30 BROWARD	Florida Statutes	Yes No	.002,
	9, Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	Istered Agent	
	ENSKI, STANLEY S		C	Clensk, STANLEY	<u>/ . S</u>	
	? Rothchild dr Val springs fl 33087		82 Street Add	dress (P.O. Box Number is Not Acceptable	e) <i>I u </i>	
CON	INE OF INITION IS DOOD!		83 .	Y C		
			84 City		85 Zip Code	
			B4 CORA	L SPRING	FL 85 7706	, フ
11, Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statute	s, the above-named con	rporation submits this statement for the partition's board of directors. I hereby accep	urpose of changing its reg	istered
agent. La	m familiar with, and accept the obliga	tions of, Section 607.0505, Flo	rida Statutes.	ation's board of directors. Thereby accep		310100
SIGNATURE	the Cellen	ماد م	······		-27.97	
	Signature, typed or printed name of registered agen OFFICERS AND		Registered Agent signature requ		DATE CDC AND DIDECTORS IN	10
12.	D OFFICENS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFIC		Addition
NAME	CELENSKI, STANLEY S		1.2 NAME			,
STREET ADDRESS	11751 ROYAL PALM BLVD 203		1.3 STREET ADDRESS			
CITY-ST-ZiP	CORAL SPRINGS FL		1.4 CITY - ST - ZIP			
TITLE		DELETE	2.1 TITLE		☐ Change ☐	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	÷		
CITY-ST-ZIF			2. 4 CITY - ST - ZIP			
TITLE	7-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	DELETE	3.1 TITLE		Change	Addition
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STREET ADDRESS			3.3 STREET ADDRESS		•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
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NAMÉ			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	•		
CITY-ST-ZIP		Thouse	4.4 CITY-ST-ZIP		T ALILI T	Table:
THILE		DELETE	5.1 TITLE		☐ Change ☐	Addition
NAME O'COLOR L'ENDOCOC			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TiTLE		Change	Addition
NAME		find process	6.2 NAME		Fin Committee Final	y rivolatell
			6.2 NAME 6.3 STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	L	with this filing does not qualif		ed in Section 119.07(3)(i), Florida Statutes	s. I further certify that the	
informatic	on indicated on this annual report or so	upplemental annual report is tr	ue and accurate and the	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as if made under d	bath; that 3