2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000064846

City-St-Zip:

Entity Name: ALLIANCE CONSTRUCTION, INC.

FILED Jan 23, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2121 PONCE DE LEON BLVD. 2121 PONCE DE LEON BLVD. PENTHOUSE II **PENTHOUSE** CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 **Current Mailing Address:** New Mailing Address: 2121 PONCE DE LEON BLVD. 2121 PONCE DE LEON BLVD. PENTHOUSE II **PENTHOUSE** CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US FEI Number: 65-0449087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: REGISTERED AGENTS OF FLORIDA LLC 100 SOUTHEAST SECOND STREET STE 3500 MIAMI, FL 331312130 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MEYERS, STUART I MEYERS, STUART I Name: Name: 2121 PONCE DE LEON BLVD SUITE 650 Address: 2121 PONCE DE LEON BLVD, PH Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: (X) Change () Addition Title: () Delete Name: LOPEZ, JORGE Name: LOPEZ, JORGE 2121 PONCE DE LEON BLVD SUITE 650 2121 PONCE DE LEON BLVD, PH Address: Address: CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition WHITE, FRANK Name: Name: 2121 PONCE DE LEON BLVD, PH Address Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: VΡ () Change (X) Addition WOLFE, LEON Name: Name: Address: Address: 2121 PONCE DE LEON BLVD, PH

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

CORAL GABLES, FL 33134

SIGNATURE: FRANK WHITE PRES 01/23/2002