

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -7 AM 4:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000085422 (2)

1. Corporation Name

EPIC CONSTRUCTORS INC.

Principal Place of Business

2500 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

Mailing Address

2500 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/08/1993

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

State, Apt. #, etc.

2a. Mailing Address

26

State, Apt. #, etc.

4. FFI Number

65-0455740

Applied For

Not Applicable

22

City & State

27

City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

Zip

Country

28

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation has liability for intangible tax under § 190.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LINDSAY, MICHAEL
2500 HOLLYWOOD BLVD.
STE. 406
HOLLYWOOD FL 33020

81 Name

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

83

84 City

FL

85 Zip Code

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

(Print Name, Title, and Address of Registered Agent, and Signature of Agent)

(Print Name, Title, and Address of Registered Agent, and Signature of Agent)

LAB

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP
TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP
TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP
TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP
TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP
TITLE
NAME
STREET ADDRESS
CITY, STATE, ZIP

D
LINDSAY, MICHAEL
2500 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020
D
KALMOWICZ JACOB
2500 HOLLYWOOD BLVD., STE. 406
HOLLYWOOD FL 33020

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE
15 NAME
16 STREET ADDRESS
17 CITY, STATE, ZIP
18 TITLE
19 NAME
20 STREET ADDRESS
21 CITY, STATE, ZIP
22 TITLE
23 NAME
24 STREET ADDRESS
25 CITY, STATE, ZIP
26 TITLE
27 NAME
28 STREET ADDRESS
29 CITY, STATE, ZIP
30 TITLE
31 NAME
32 STREET ADDRESS
33 CITY, STATE, ZIP

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 11.02(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemented annual report is true and accurate and that my signature shall have the same legal effect and consequences as that of an officer or director of this corporation on the return or financial statement to be submitted to the Department of State as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an addendum with an addendum.

SIGNATURE: *Michael Lindsay* MICHAEL LINDSAY 3-10-95 305-925-4060
LAB