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CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 AM 8:24

DOCUMENT # P94000011984 (9)

1. Corporation Name
BILT-RITE CONSTRUCTION SERVICES, INC.

Principal Place of Business	Mailing Address
9976 NOB HILL PL SUNRISE FL 33351	9976 NOB HILL PL SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/09/1994
3a. Date of Last Report: NA

2. Principal Place of Business
21 1304 SW. 160TH AVE
22 Suite, Apt. #, etc. Suite 112
23 City & State: Fort Lauderdale FL.
24 Zip: 33326 25 Country: U.S.A.

2a. Mailing Address
26 1304 SW 160TH AVE
27 Suite, Apt. #, etc. Suite 112
28 City & State: Ft. Lauderdale FL
29 Zip: 33326 30 Country: USA.

4. FEI Number: 65-0487335 ☐ 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

9. Name and Address of Current Registered Agent

ABBONDANZA, JAMES
9976 NOB HILL PL
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81 Name: ABBONDANZA, JAMES
82 Street Address (P.O. Box Number is Not Acceptable): 797 SAN REMO DR
83
84 City: FT. LAUDERDALE FL 85 Zip Code: 33326

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: JAMES ABBONDANZA DATE: 1/20/95
Signature of new registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	1.1 TITLE	P	☑ Change ☐ Addition
NAME	ABBONDANZA, JAMES	1.2 NAME	ABBONDANZA, JAMES	
STREET ADDRESS	9976 NOB HILL PL	1.3 STREET ADDRESS	797 SAN REMO DR	
CITY-ST-ZIP	SUNRISE FL 33351	1.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE		2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I/We 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)(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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JAMES ABBONDANZA 1/20/95 (305) 389-5216
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0240174 CP