FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P94000014915 (0) R.B. CONSTRUCTION U.S.A., INC. Principal Place of Business Mailing Address 1499 S.W. 30TH AVE 1499 SW 30TH AVE SUITE 30 STE. 30 DO NOT WRITE IN THIS SPACE **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** 3. Date Incorporated or Qualified 02/23/1994 2a. Mailing Address 4. FEI Number Applied For 3300 N. STATERD 7 26 3300 N. STATE RD7 65-0469151 Not Applicable \$8.75 Additional MAIL BOX F 534 5. Certificate of Status Desired MAIL BUX Fee Required City & State , HULLYWOOD 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year totangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent BEHAR, LARRY J P.A. BROUSSEAC 888 SOUTHEAST THIRD AVENUE 82 STE. 400 FORT LAUDERDALE FL 33316 84 FOLLYWOOD 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. Thereby accept the appointment as registered agent. Lam familiar with part accept the obligations of, Section 607 0505, Florida Statutes. Security the distribution of the disputation of the Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Addition DELETE 1.1 TITLE Change TITLE **BROUSSEAU, RODRIGUE** BROUSS E A4 1.2 NAME NAME 10148 B EAGLEWOOD TER GREENTREE 3300 N. STATE STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Addition NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP CITY - ST - ZIP DELFTE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ■ Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 suppliemental 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: X

Braces

2-2-98 954-893-5676

FILED

Feb 10 1998 8:00am

Secretary of State