FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000025178 (2)

1. Corporate Name
AMERICAN CONSTRUCTION INDUSTRIES, INC.

Principal Place of Business
10330 N.W. 55TH STREET
SUNRISE FL 33351

Mailing Address
10330 N.W. 55TH STREET
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/01/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or Bldg. — 22
Suite, Apt. # or Bldg. — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 65-0478497 — 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. Pursuant to Section 607.0505, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent
B1 Name: Michele McLeod
B2 Street Address (P.O. Box Number is Not Acceptable): 10330 NW 55 Street
B3
B4 City: Sunrise FL B5 Zip Code: 33351

11. Pursuant to the provisions of Sections 607.0505 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 hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Michele M. McLeod Michele McLeod 4-25-95
(Signature of Registered Agent) (Print Name of Registered Agent) (Date)

12. OFFICERS AND DIRECTORS

TITLE D
NAME MCLEOD, MICHELE
STREET ADDRESS 10330 N.W. 55TH STREET
CITY, ST, ZIP SUNRISE FL 33351

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, Florida Statutes. Further certify that the information indicated on this annual report or supplemental annual report is true and complete and that the street address of the registered office is a place of business of the corporation or the address of a person or firm upon whom process may be served, or is the address of a registered agent for service of process, and that my name appears in Block 12 or Block 13 (if changed) or as an attachment with an address.

SIGNATURE: Michele M. McLeod Michele McLeod 4/25/95 (305)746-5731
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR

0230002 CF