

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000076225

1. Entity Name

BRS CONSTRUCTION CORP.

FILED

May 18, 2000 8:00 am
Secretary of State

05-18-2000 90289 022 ***150.00

Principal Place of Business

1600 GOLF RD
SUITE 750
ROLLING MEADOWS IL 60008
US

Mailing Address

1600 GOLF RD
SUITE 750
ROLLING MEADOWS IL 34677-2466
US

2. Principal Place of Business

1032 East Lake Club Drive
Suite, Apt. #, etc.

3. Mailing Address

1032 East Lake Club Dr.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Oldsmar FL 34677
Zip Country

City & State

Oldsmar FL 34677
Zip Country

4. FEI Number 65-0529968

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOMBACH, GEOFFREY S
500 EAST BROWARD BLVD.
SUITE 1950
FORT LAUDERDALE FL 33394

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	STARNES, BOB R	118 HALY RD., 16N	EAST DUNDEE IL 60118	<input type="checkbox"/>
P	ROBERT R. STARNES	1600 GOLF ROAD SUITE #750	ROLLING MEADOWS FL 60008	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		1032 East Lake Club Drive	Oldsmar FL 34677	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-2000 727-781-1988

Date

Daytime Phone #

CR2E034 (9/99)