## 0560890

FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Mar 07, 2001 8:00 am DOCUMENT # **P94000090037 Secretary of State** RICHARD KAISER CONSTRUCTION, INC. 03-07-2001 90625 007 \*\*\*150.00 Principal Place of Business Mailing Address 1177 SE THIRD AVE 1177 SE THIRD AVE FT LAUDERDALE FL 33316-1197 FT LAUDERDALE FL 33316-1197 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0539983 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MAC IVER, STUART J Street Address (P.O. Box Number is Not Acceptable) 1177 SOUTHEAST THIRD AVENUE FORT LAUDERDALE FL 33316-1197 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) TITLE TITLE ☐ Delete ☐ Change ☐ Addition KAISER, RICHARD NAME NAME STREET ADDRESS 3541 S.W. 21ST STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP FORT LAUDERDALE FL 33312 TITLE Delete ☐ Change ☐ Addition KAISER, MARGIE C NAME NAME STREET ADDRESS 3541 S.W. 21ST STREET STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33312 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information, upplied with this filling 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 suggict, intal 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 of trustee improvered to effect 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 addition, swift an other like empowered.

SIGNING OFFICER OR DIRECTOR

RICHARD KAISER