

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000067917

1. Corporation Name

A-1 INTERNATIONAL CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
3661 N.W. 126TH AVENUE CORAL SPRINGS FL 33065	1440 DE JAFFA LAVAL, OUEBEC H7P 4K9
COUNT OF HIMOUTE DOOD	Divine, Golded IIII 400

May 05, 1999 8:00 am Secretary of State

05-05-1999 90019 006 ***150.00



CA				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed			
						09/01/1995			
2. Principal P	al Place of Business 2a. Mailing Address					4. FEI Number		Ar	plied For
21		26				65-0759202		No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.			E Cartifonto af Status Desired		\$8.75	Additional
22	27			5. Certifcate of Status Desired		Fee Re	equired		
City & Stat	City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28			Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Zip Country			8. This corporation owes the curr	ent year Inta	angible	
24	25	29	30			Personal Property Tax.		Yes	⊠ No
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New F	Registered A	\gent	
				81	Name				1
	RCHAT, STEVEN M			82 Street Address (P.O. Box Number is Not Acceptable)					
848 1	BRICKELL AVE., STE. 400			102	Sueer Au	idiass (F.O. Box idiliber is idol Accepta	iolej		}
mlan	/il FL 33131								
				<u> </u>				T - T	
				84	City		FL	85 Zip	Code
44 Duraugat	to the provisions of Sections 607.06	502 and 607 1508 Florid	a Statutes the	ahove	a-named co	progration submits this statement for the	numose of	changing its	registered
office or r	egistered agent, or both, in the Stat	le of Florida. Such chang	e was authoriz	ed by	the corpora	ation's board of directors. I hereby accep	ot the appoir	ntment as re	egistered
agent. i a	m familiar with, and accept the oblig	gations of, Section 607.0	505, Florida St	atutes	•				
SIGNATURE			2.070 B				DATE		\
12.	Signature, typed or printed name of registered a	AND DIRECTORS	(NOTE: Register		t signature requ	uired when reinstating) ADDITIONS/CHANGES TO OF		DIRECTO	DS IN 12
TITLE	D	DE		TITLE		ADDITIONS/CITANGES TO OF	ICENS AIR	Change	Addition
	GUAY, GAETAN		1		\				
NAME:	615 RUE POMEROL			NAME					
STREET ADDRESS		A 17A ANI4	4		ADDRESS				Į
CITY-ST-ZIP	ROSMERE, QUEBEC, CANAD	A J/A -4N1 □ DE		CITY-S	r-ZIP			Change	Addition
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NAME	}			NAME	}				1
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CITY-ST-ZIP				CITY-S	T-ZIP				
TITLE		i de	LETE 3.1	TITLE	1			☐ Change	☐ Addition ì
NAME			3.2	NAME					
STREET ADDRESS			3.3	STREET	ADDRESS				}
CITY-ST-ZIP			3.4	.CITY-S	T-ZIP				
TITLE	_	☐ DE	LETE 4.1	TITLE				Change	Addition [
NAME	}		4.2	NAME					
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CITY-\$T-ZIP			4.4	CiTY	r-ziP				
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NAME			5.2	NAME	ĺ				}
STREET ADDRESS			5.3	STREET	ADDRESS]
CITY-ST-ZIP	1		5.4	CITY-S	-ZIP	•			ĺ
TITLE		DE	LETE 81	TITLE				Change	Addition
NAME			6.2	NAME				=	
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	. 1				
CALTESTE DE	l		V.4	A11 1-9	· — ·				I

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 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, with all other like empowered.

SIGNATURE:

OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR ,president