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

Mailing Address

220 CONGRESS PARK DRIVE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

220 CONGRESS PARK DRIVE

SIGNATURE: .

STE 135



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 22 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075244 (0)

CONSTRUCTION MANAGEMENT SERVICES, INC.

DELRAY BEACH FL 33445 US		DELRAY BEACH FL 33445-460	DELRAY BEACH FL 33445-4605		
		US			3. Date Incorporated or Qualified 3a. Date of Last Report
					09/29/1995 06/18/1996
a Principal F	Place of Business	2a. Mailing Address			
<u> </u>	icos o Basinoss	h			
21		26			65-0611900 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & Stal	te	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			
Ζφ	Country		Countr	·····	Treat and Contribution
 	<u>├</u>	Zip	٦ .	y	This corporation has liability for intangible tax under s. 199.032,
24	25	[29] 30			Florida Statutes Yes No
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
PULIK, DONNA				Name	
			_		
220 CONGRESS PARK DRIVE			82	Street A	Address (P.O. Box Number is Not Acceptable)
STE 135			-22		
DELRAY BEACH FL 33445			83	'	
			-	O3.	I and To Oak
			84	City	FL 85 Zip Code
44 Purguant	to the provisions of Sections 607.050	32 and 607 1508 Florida Statutes	the abov	o named	
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. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.					
SIGNATURE					
SIGNATORE	Signature, typed or printed name of registered ag	ent and title it applicable. (NOTE, Re	gistered Ag	ent signature	required when reinstating) DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME					2
	PULIK, DONNA		1.2 NAME		
STREET ADDRESS	220 CONGRESS PARK DRIVE		1.3 STAEE	T ADDRESS	
CITY-S1-ZIP	DELRAY BEACH FL 33445		1.4 CiTY-1	ST-ZIP	
TITLE		DELETE	21 TITLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2351HEE	T ADDRESS	
CITY-ST-ZIP			2 4 City-	ST-ZIP	
TITCE		☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME			32 NAME		
STREET ADDRESS			22 61000	T ADDRESS	
CITY-S1-ZIP			34. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME	<u> </u>		4 2 NAME		
STREET ADDRESS			43 STREE	T ADDRESS	
CITY-S1-ZIP					
		DELETE	4.4 City-:	51-ZIF	
TITLE		☐ DETEIG	5 1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS	1		53 STREE	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-:		
TITLE		DELETE	6.1 TITLE	·	☐ Change ☐ Addition
1	•	Cul Decere			L. Change L. J. Addition
NAME			62 NAME	- 1	
STREET ADDRESS			6.3 STREE	T ADDRESS	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	
14. I do here	by certify that the information supplic	ed with this filing does not qualify for	or the exe	emption st	tated 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 trustile empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name					
am an officer or director of the corporation or the rectiver or trustite 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 or an attachment with an address.					
appears in block its of block to it charged, of set an attach plant address.					