## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Scoretary of State

DIVISION OF CORPORATIONS

P95000078671 (1) DOCUMENT #

CPS CONSTRUCTION, INC.

Principal Place of Business Mailing Address **810 SATURN STREET STE 16** 810 SATURN STREET STE 16 JUPITER FL 33477 JUPITER FL 33477 3. Date incorporated or Qualified 3a. Date of Last Report 10/13/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees  $Z_{\rm ID}$ Country  $Z_{\Psi}$ Country 8. This corporation has liability for intangible tax under s. 199,032, 24 Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name POLLOCK, MONTE 82 Street Address (P.O. Box Number is Not Acceptable) 810 SATURN STREET STE 16 JUPITER FL 33477 83 City 84 Zip Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. Signature, typical or product name of registered agent and title it applicable (NOTE: Riigistered Agent signature required when reinstating) DATE 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THLE DELETE 1.1700 Addition Change POLLOCK, MONTE NAME 1.2 NAME 810 SATURN STREET STE 16 STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33477 CHIY - ST - 7IF 1.4 C(TY - ST - 7)P TILLE DELETE 2.171118 Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS City-St-ZiP 2.4 CITY-ST-ZIP DELETE THLE 3 111TLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - \$1 - 7IP 3.4 CITY-\$1-7IP TITLE DELETE 4 1 TITLE Change Addition NAMÉ 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-SI-ZiP 4.4 CITY - \$1-2IP **000001836260** -05/23/96--01014--018 TIFLE DELETE 5. 1 TITLE ... Addition NAME 5.2 NAME -\*\*\*200.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TOULE DELETE 6 1 TITLE [7] Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP

14. I do horeby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 3 if changed, or on an attachment with an address.

SIGNATURE:

monte Pollock SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

CR2E034 (12/95)