

FILED
Apr 29, 2003 8:00 am
Secretary of State

04-29-2003 90073 043 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #P95000096680			
1. Entity Name GEORGE W. MURRAY GENERAL CONTRACTOR INC.			
Principal Place of Business 2410 NW 11TH ST FT. LAUDERDALE, FL 33311		Mailing Address 800 W MCNAB RD FT LAUDERDALE, FL 33309	
2. Principal Place of Business		3. Mailing Address <i>526 Oakland park Blvd</i>	
State, Apt. #, etc.		City, Apt. #, etc. <i># 228</i>	
City & State		City & State <i>Wilton manors FL</i>	
Zip	Country	Zip	Country
<i>33311</i>		<i>33311</i>	<i>USA</i>
6. Name and Address of Current Registered Agent MURRAY, GEORGE W 2410 NW 11TH ST FT. LAUDERDALE, FL 33311		4. FEI Number 65-0630443	
		Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>George W. Murray</i> DATE <i>4/15/03</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when changing)			
FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$250.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MURRAY, GEORGE W 2410 NW 11TH ST. FT. LAUDERDALE, FL 33311 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIC. PRES MICHAEL Roberts 1433 NE 24 CT Wilton manors FL 33305 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>George W. Murray</i>		DATE: <i>4/15/03</i> 9595874989	

10091085



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)