

FILED

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**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000002278

1. Entity Name
CHOICE CONSTRUCTION CORPORATION, INC.Principal Place of Business
6855 NW 21ST TERR
FT LAUDERDALE, FL 33309 USMailing Address
6855 NW 21ST TERR
FT LAUDERDALE, FL 33309 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0630315Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~FARQUHARSON, VINCENT~~
~~6855 NW 21ST TERR~~
~~FT LAUDERDALE, FL 33309~~Name
IVAN JANOWSKY
Street Address (P.O. Box Number Is Not Acceptable)
744 SOLANDRA LANE
City TAMARAC FL Zip Code 33321

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

12/1/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State9. 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 FARQUHARS, VINCENT ☐ Delete
STREET ADDRESS 6855 NW 21ST TERR
CITY-ST-ZIP FT LAUDERDALE, FL 33309TITLE SECRETARY ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME FARQUHARSON, LEROY V ☐ Delete
STREET ADDRESS 343 NW 108 AVE.
CITY-ST-ZIP CORAL SPRINGS, FL 33071TITLE PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME IVAN JANOWSKY
STREET ADDRESS 744 SOLANDRA LANE
CITY-ST-ZIP TAMARAC FL 33321TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/1/03

CR2034 (10/02)