1999



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FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Feb 01, 1999 8:00 am Secretary of State

02-01-1999 90004 030 \*\*\*150.00

1. Corporation Name SELECT CONSTRUCTION, INC.									
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Principal Place of Business Mailing Address									
270 NE 26TH ST 270*NE 26TH ST BOCA RATON FL 33431 BOCA RATON FL 33431									
DOOR INTOIT IE SONS					DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qual 02/14/1996	ifed			
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		App	olied For	7.5	
21	<u> </u>	26		_	65-0647121			Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	······································		5. Certificate of Status Desire	d . 🗆	\$8.75 A Fee Rec	dditional quired ص	·
City & Stat	0	City & State			6. Election Campaign Finance	ing	\$5.00	May Be	
23		28			Trust Fund Contribution		Added to	Fees	
Zip	Country	Zip	Cour	try	This corporation owes the Personal Property Tax.	current year Int		 □No	
24	9. Name and Address of Curre	29 29 Agent	30]		10. Name and Address of N	ew Registered			
	The state of the s			B1 Name					
DAHL, NORMAN 270 NE 26TH ST		-	Street Addr	ess (P.O. Box Number is Not Acc	ceptable)		,		
	A RATON FL 33431		ŀ	33	Professional Contraction		The Plant		
:				Cit.	The state of the state of		85 Zip C	761 - S	
			.	B4 City		· FL	_		
11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig	602 and 607.1508, Florida Statut	es, the ab	ove-named corporation	oration submits this statement for	the purpose of	changing its	registered sistered	
ו ועי שטוונט	edisteled adelit, or pour, in the orace								
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	rida Statu	es.	or s board or directors. Frictory b			,,,,,,,,,,,	
agent. I a SIGNATURE	· '-					DATE			4
	Signature, typed or printed name of registered ag			gent signature required		DATE		RS IN 12	100
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS A PTS	gent and title if applicable. (NOTE	: Registered	gent signature required	d when reinstating)	DATE			7447007
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS A PTS DAHL, NORMAN	ent and title if applicable. (NOTE	13. 1.1 TITI 1.2 NA	gent signature required	d when reinstating) 3.755 ADDITIONS/CHANGES TO	DATE	ND DIRECTO	RS IN 12	004744000
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered ag OFFICERS A PTS DAHL, NORMAN 270 NE 26TH ST	ent and title if applicable. (NOTE	13. 1.1 TITI 1.2 NA 1.3 STF	gent signature required E E EET ADDRESS	d when reinstating) 3.755 ADDITIONS/CHANGES TO	DATE	ND DIRECTO	RS IN 12	00000
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SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered ag OFFICERS A PTS DAHL, NORMAN 270 NE 26TH ST	gent and title if applicable. (NOTE ND DIRECTORS DELETE	13. 1.1 TITI 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	gent signature required E IE EET ADDRESS '-ST-ZIP E	d when reinstating) 3.755 ADDITIONS/CHANGES TO	DATE	ND DIRECTO	RS IN 12	ODD-1744/00
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered ag OFFICERS A PTS DAHL, NORMAN 270 NE 26TH ST BOCA RATON FL 33431	pent and title if applicable. (NOTE  ND DIRECTORS  DELETE  DELETE  DELETE	2. Navistre d. 13. 1.1 TITI 1.2 NAV 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAV 2.3 STF 2.4 CIT 3.1 TITI 3.2 NAV 3.3 STF 3.4 CIT 4.1 TITI 4.2 NA 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAV 5.3 STF 5.4 CIT 6.1 TITI 6.2 NAV 6.2 NAV 6.3 NAV 6.3 NAV 6.3 NAV 6.4 NAV 6.5 NAV	gent signature required  E  E  E  E  E  E  E  E  E  E  E  E  E	d when reinstating)  ADDITIONS/CHANGES TO	OFFICERS AN	ND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition	
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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: