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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000017833

1. Corporation Name

CONSTRUCTION LABOR UNLIMITED INCORPORATED

Principal Place of Business Mailing Address							I (G i i g i i g i g i i g i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i g i i i i g i i i i g i i i i g i i i i g i i i i g i		
			45 DAVIE BLVD #204 LAUDERDALE FL 33312						
FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312							DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualifed		
							02/27/1996		
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number	Apr	olied For
21		26					65-0647678	Not	Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
22		27					G. Gorinado di Guardo Datario	Fee Re	`
City & State			City & State				6. Election Campaign Financing	\$5.00	•
23	· · ·	28		+ .***. + -		·	Trust Fund Contribution	Added to	Fees
Zip	Country	<u> </u>	Zip	_	ntry		8. This corporation owes the current year Intar		□No
24	25	29		30	_		Tersonal Troperty Tux.		LIND.
	9. Name and Address of Currer	it Regis	tered Agent		81	Name	10. Name and Address of New Registered A	Jen	
SMITH, FRANK					6 1	Name			
2145 DAVIE BLVD #204					82 Street Address (P.O. Box Number is Not Acceptable)				
	AUDERDALE FL 33312				83				
rı L	AUDENDALL I L 333 IZ				0.3				_
			•		84	City	<u> </u>	85 Zip C	ode
			44		Ш	<u> </u>	<u> </u>		rogistared.
office or r	edistered agent or both in the State	of Floric	ia. Such change was ai	JUNONZEC	עטנ	the corpora	propriation submits this statement for the purpose of clation's board of directors. I hereby accept the appoint	ment as rec	gistered
. agent. I a	m familiar with, and accept the obliga	itions of,	, Section 607.0505, Flor	rida Stat	utes.				٠.
SIGNATURE							(ired when reinstation) DATE		
	Signature, typed or printed name of registered age OFFICERS AN			Registered	Agen	nt signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
12.	T T TO THE TOTAL TO THE T	IU DIKE	DELETE	1.1 11	TI F	$ \top$	ADDITIONAL TOTAL T	Change	Addition
TITLE	WILCOX, NORMAN		15.75	1.2 N					
NAME	ALLA MINIOCTONI DD					TADORESS			
STREET ADDRESS									
CITY-ST-ZIP	MIRAMAR FL 33023		DELETE	1.4 C	TY-S	1-ZIP		☐ Change	Addition
TITLE	VP		El OCTETE	2.1 11 2.2 N				_ •	_
NAME .	SPERA, KEN		•				-		
STREET ADORESS	1 ' ' ' '					TADORESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33317		THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	_		ST- ZIP		Change_	Addition
TTLE	S POOL POV	القريب فالتريبان	- DELETE	3.1.7					_
NAME	GORDON, ROY			3.2 N					
STREET ADDRESS						TADORESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33312		□ ACI ETE	_		T-ZIP		☐ Change	Addition
TITLE	P		☐ DELETE	4.1 71		1		CT curaido	,
NAME	SMITH, FRANK			4.21					
.STREET ADDRESS			4			TADORESS			
- CITY-ST-ZIP	FT L'AUDERDALE FL 33312	3.				T-ZIP		Chases	Addition
TITLE		15	. DELETE	5.1 T				Change	Addition
NAME			•	5.2 N					
STREET ADDRESS						T ADDRESS	ه خود در		
CITY-ST-ZIP					TY-S	T-ZIP			
TITI ¢			☐ DELETE	6.1 T	TLE			Change	☐ Addition

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 supplied annual report is five 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 impowered 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 a data or with an other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME ,

STREET ADDRESS

CITY-ST-ZIP

OFFICER OR DIRECTOR

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90144 042 ***150.00