## FILED Sep 05, 2001 8:00 am Secretary of State **2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT #** P96000052783 1. Entity Name BIL-DAN CONSTRUCTION, INC. 09-05-2001 90007 022 \*\*\*550.00 Principal Place of Business Mailing Address 4101 RAVENSWOOD ROAD 4101 RAVENSWOOD ROAD **SUITE 129 SUITE 129** DANIA FL 33312 **DANIA FL 33312** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 65-0673974 Not Applicable --Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATE CREATIONS ENTERPRISES, INC. Street Address (P.O. Box Number is Not Acceptable) 4521 PGA BLVD. #211 PALM BEACH GARDENS FL 33418 City 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. (5/01) TITI E ☐ Delete TITLE ☐ Change ☐ Addition ROSENSTEIN, BILLIE NAME % 4101 RAVENSWOOD RD. SUTIE 129 CR2E034 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DANIA FL 33312** CITY-ST-ZIP TITLE Delete TITLE Change [ ] Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY\_ST\_ZIP\_ CITY-ST-7IP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

changed, or on an attac

SIGNATURE: