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

Mailing Address

5913 & DIXIE HIGHWAY

W PALM BEACH FL 33405

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

Principal Place of Business 5912 S DIXIE HIGHWAY

W PALM BEACHLEL 33405

DOCUMENT # P96000064438

CAPITAL CONSTRUCTION SERVICES SOUTH, INC.

4. FEI Number Applied For 2a, Mailing Address 2. Principal Place of Business 65-0682729 Not Applicable 26 222 LAKEVIEW AVE. 21 222 LAKEVIEW \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 1-60-226 Fee Réquired> 1.60-226 6. Election Campaign Financing \$5.00 May Be City & State 28 WEST PALM BEACH 23 WEST Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible ĎNo. 33401 30 usa Personal Property Tax. ☐ Yes U5A 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 82 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. **V** Change ☐ DELETE 1.1 TITLE TITLE RONK, GREGORY M. 1.2 NAME RONK, GREGORY M NAME 222 LAKEVIEW AVE, SUITE 160-226 5913 S DIXIE HIGHWAY SUITE 2E 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL. 3340 W PALM BEACH FL 33405 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE RONK, CHRISTINA D 2.2 NAME NAME 5913 S DIXIE HIGHWAY SUITE 2E 2.3 STREET ADDRESS STREET ADDRESS W PALM BEACH FL 33465 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 41 TITLE TITLE 4. 2 NAME

A not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an amnowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address, with all other like empowered. 14. I hereby certify that the information supplied with this filing do ntal annual reportis indicated on this annual report or surplem Block 12 or Block 13 if changed, or

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

BOURED SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR

□ DELETE

□ DELETE

12,28,98

Change

□ Change

Addition

☐ Addition

FILED Mar 02, 1999 8:00 am

Secretary of State

03-02-1999 90043 039 ***150.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

08/01/1996

CR2E034 (11/98)