2002 Uniform Business Report (UBR)

Mar 25, 2002 8:00 am P96000079962 DOCUMENT # **Secretary of State** 1. Entity Name CORE CONSTRUCTION GROUP, INC. Principal Place of Business Mailing Address 1838 WOODWARD ST 1836 WOODWARD ST SUITE OBLANDO EL 32803 OBCANDO FL 32803 Principal Place of Business 3. Mailing Address VISION AV DIVISION AV 46 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3432629 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HAIDER, DILRUBA Street Address (P.O. Box Number is Not Acceptable) 9768 BAY VISTA ESTATES ORLANDO FL 32836 City Zip Code 8. The above named entity Aubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. RUBA HAIDER Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 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 May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. SECRETARY/UCE PROSIDENT (9/01)TITLE Delete TITLE NAMÉ. HAIDER, DILRUBA NAME DILFUBA HANDOA 9768 BAY VISTA ESTATES BLVD STREET ADDRESS STREET ADDRESS 9768 BAY VISTA 53THT83 PLANDO, FL 328360 CITY-ST-ZIE ORLANDO FL 32836 CITY-ST-ZIP TITLE PD ☐ Delete TITLE HAIDER, SYED I NAME NAME 9768 BAY VISTA ESTATES BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32836 CITY-ST-ZIP SHOPE HOLDER TITLE Delete TITLE ☐ Addition CFO ISLAM, DIDAR NAME DIDAR ISLAM STREET ADDRESS 6629 WINTER OAKS BLVD. STREET ADDRESS 6629 WINTER OBES BUD CITY-ST-ZIP ORLANDO FL 32819 CITY-ST-ZIP OPLANDO, FL TITLE DOL ÎILE ☐ Delete Addition SHAPE HOLDER SULTANA, FAHMIDA NAME NAME SULTANA FAH MIDA STREET ADDRESS 6629 WINTER OAKS BLVD. STREET ADDRESS 6629 WINTER DAKS BLUD CITY-ST-ZIP ORLANDO FL 32819 CITY-ST-7IP TITLE □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 of true 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 attachment with an powers, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

S. 8. 8. 43