

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000007246

1. Entity Name

BOROS & WOLF GENERAL CONTRACTORS, INC.

**FILED**  
**Mar 24, 2000 8:00 am**  
**Secretary of State**

03-24-2000 90063 014 \*\*\*150.00

Principal Place of Business

2900 NORTHEAST 40TH STREET  
FORT LAUDERDALE FL 33308

Mailing Address

805 FALLING WATER RD  
WESTON FL 33326-3556

2. Principal Place of Business

3. Mailing Address

2900 NE 40 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Fort Lauderdale, FL

Zip

Country

Zip

Country

33308

Broward

4. FEI Number

65-0730054

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WATSON, JOHN A  
100 NORTHEAST THIRD AVENUE  
SUITE 850  
FORT LAUDERDALE FL 33301

Name **SAME**

Street Address (P.O. Box Number is Not Acceptable)

2312 Wilton Drive

City

Fort Lauderdale

FL

Zip Code

33305

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
NAME **BOROS, JULIUS N JR.**  
STREET ADDRESS **2900 NORTHEAST 40TH STREET**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **D** ☐ Delete  
NAME **WOLF, RONALD**  
STREET ADDRESS **2900 NORTHEAST 40TH STREET**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **D** ☐ Delete  
NAME **BOROS, ARMEN C**  
STREET ADDRESS **2900 NORTHEAST 40TH STREET**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **D** ☐ Delete  
NAME **WOLF, JODY E**  
STREET ADDRESS **2900 NORTHEAST 40TH STREET**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 attachment with an address, with all other like empowered.

SIGNATURE:

*Jody E. Boros Wolf*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/00 9543891604  
Date Daytime Phone #

CR2E034 (9/99)