

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000048626

1. Entity Name

U.S. CONSTRUCTION & DEVELOPMENT CORP.

FILED

Apr 30, 2001 8:00 am  
Secretary of State

04-30-2001 90319 024 \*\*\*150.00

Principal Place of Business

Mailing Address

1205 ARVIDA AVE  
BDC 1  
WESTON FL 33327

318 INDIAN TRACE  
SUITE 430  
WESTON FL 33326  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2600 GLADES CIRCLE  
Suite, Apt. #, etc.  
A100

3. Mailing Address

2600 GLADES CIRCLE  
Suite, Apt. #, etc.  
A100

City & State

WESTON FL

City & State

WESTON, FL

4. FEI Number

65-0758340

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

EDELMAN, KENNETH  
318 INDIAN TRACE -PMB 430  
WESTON FL 33326

7. Name and Address of New Registered Agent

Name  
EDELMAN, KENNETH  
Street Address (P.O. Box Number is Not Acceptable)  
2600 GLADES CIRCLE  
SUITE 100  
City WESTON FL Zip Code 33327

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, 2001 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

TITLE PSTD ☐ Delete  
NAME EDELMAN, KENNETH  
STREET ADDRESS 318 INDIAN TRACE -PMB 430  
CITY-ST-ZIP WESTON FL 33326

TITLE ST ☐ Delete  
NAME EDELMAN, DEBRA  
STREET ADDRESS 318 INDIAN TRACE -PMB 430  
CITY-ST-ZIP WESTON FL 33326

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 2600 GLADES CIRCLE SUITE 100  
CITY-ST-ZIP WESTON, FL 33327

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 2600 GLADES CIRCLE SUITE 100  
CITY-ST-ZIP WESTON, FL 33327

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

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

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:

*Kenneth Edelman* KENNETH EDELMAN

4-10-01

954-384-6860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)