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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000052955 (6)

CBS BUILDING CONTRACTORS, INC.

## **FILED** Feb 27 1998 8:00am Secretary of State



					48/17 20/20 20/18 1888 1848 18/8 20/8 20/4 208
Principal Plac	e of Business	Mailing Address		1 10011031 110 10111 10811 20111 00111	)
	N. FEDERAL HWY. STE. 104 2424 N. FEDERAL HWY. STE. 10		04		÷
BOCA RATOR	BOCA RATON FL 33431 BOCA RATON FL 3343			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				06/16/1997	
Principal Place of Business     2a, Mailing Address				4. FEI Number	Applied For
21 5700 Memorial Highway		26 PO BOx 24463		65-0763379	Not Applicable
Suite, Apt. #, etc. 22  Suite 215		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City 8 State		a Floriton Commissa Financias	Fee Required
23 Trun PA FL		28 Tampa FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Z <sub>ID</sub> Co	untry	8. This corporation owes or has	1,0000 10 , 000
24 33619	25 USA	29 33623 30	USA	Personal Property Tax due Jur	
	g. Name and Address of Current	Registered Agent		10. Name and Address of New F	Registered Agent
SIGISMUND, STANLEY P			81 Name		
8006 GREENSHIRE DRIVE			82 Street Address (P.O. Box Number is Not Acceptable)		
TAMPA FL 33634			83		
			84 City		FL 85 Zip Code
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12,	Signature, typed or printed name of registived agent OFFICERS AND			required when reinstating)  ADDITIONS/CHANGES TO OFF	DATE
TITLE	D		IITLE	President, Director Sigismuni, Stanley P. 8006 Greenstire Dr.	Change Addition
NAME	SIGISMUND, CAROLE J	1.21	NAME	SIGISLIUNI, STANLEY P.	
STREET ADDRESS	8006 GREENSHIRE DR.	1.33	STREET ADDRESS	8006 GREENSHIRE DR.	l:
CITY-ST-ZIP	TAMPA FL 33634	14/	CITY-ST-ZIP	TAMPA, FL 33634	l)
TITLE	D	DELETE 2.11	TITLE		Change Addition
NAME	SIGISMUND, STANLEY P	221	NAME		
STREET ADDRESS	8006 GREENSHIRE DR.	23!	STREET ADDRESS		<b>,</b> ,
CITY-ST-ZIP	TAMPA FL 33634		CITY-ST-ZIP		
TITLE			TITLE		Change Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		ŀ
CITY-ST-ZIP TITLE		***************************************	CITY-ST-ZIP	15 to	☐ Change ☐ Addition
NAME		— I · · ·	NAME		C change C xeation
STREET ADDRESS		_ · -	STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		1
TITLE			TITLE		Change Addition
NAME		5.21	NAME		1
STREET ADDRESS		5.3 !	STREET ADDRESS		
CITY-ST-ZIP		5.4 (	CITY-ST-ZIP		
TITLE		DELETE 6.11	TITLE		☐ Change ☐ Addition
NAME		6.21	NAME		
STREET ADDRESS		6.3 8	STREET ADDRESS		
CITY-ST-ZIP	postile that the information country 2		CITY-ST-ZIP	d in Coston 110.07/03/0 Florida Continue	Livethor could, that the file-
TAL INGREDVC	certify that the information supplied with	LIBES MIDGLEGOES FIOL QUARRY TOF THE EX	CELLICITON SIATO	o in seciion 119 076300. Florida Statutas.	i turiner ceruiv that the intormation. I

indicated on this annual report or supplemental annual report is frue 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 12 or Block 13 granged, or organ attachment with an address.

2/23/98 (813)888-8696