

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 23, 2003 8:00 am
Secretary of State

06-23-2003 90514 001 ***300.00

0345709 AV

DOCUMENT # P98000020821

1. Entity Name

INFANTINO CONSTRUCTION, INC.



Principal Place of Business

**5972B SW 40 AVENUE
FORT LAUDERDALE FL 33314-7510**

Mailing Address

**5972B SW 40 AVENUE
FORT LAUDERDALE FL 33314-7510**

2. Principal Place of Business

5000 SW Sand Street

3. Mailing Address

5000 SW Sand Street

Suite, Apt. #, etc.

Suite 513

Suite, Apt. #, etc.

Suite 513

City & State

DAVIE FL

City & State

DAVIE FL

Zip

33314

Country

USA

Zip

33314

Country

USA

4. FEI Number

65-0827155

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DAVID ALAN KOFSKY, PA
3440 HOLLYWOOD BLVD., SUITE 450
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

Name

DAVID BECKER C.P.A.

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

2404 Hollywood Blvd

City

Hollywood

FL

Zip Code

33020

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David Becker CPA

(NOTE: Registered Agent signature required when reinstating)

DATE

1-13-02

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **INFANTINO, FRANCO**
STREET ADDRESS **5972B SW 40 AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33314-7510**

TITLE **D** ☐ Delete
NAME **INFANTINO, TRACI**
STREET ADDRESS **5972B SW 40 AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33314-7510**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FRANK INFANTINO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-02

Date

954 581-4493

Daytime Phone #

CR2E034 (10/02)