

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

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90051 031 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000047749			
1. Corporation Name UPSTATE CONSTRUCTION INC.			
Principal Place of Business 21495 WOODCHUCK LANE BOCA RATON FL 33428		Mailing Address 21495 WOODCHUCK LANE BOCA RATON FL 33428	
2. Principal Place of Business 21 204 PATHFINDER CT. Suite, Apt. #, etc. 22		2a. Mailing Address 26 204 PATHFINDER CT. Suite, Apt. #, etc. 27	
City & State 23 TRAVELERS REST, SC Zip Country 24 29690 25 GREENVILLE		City & State 28 TRAVELERS REST, SC Zip Country 29 29690 30 GREENVILLE	
9. Name and Address of Current Registered Agent CARUSO, BARBARA 21495 WOODCHUCK LANE BOCA RATON FL 33428			
10. Name and Address of New Registered Agent 81 Name STEPHEN CIRIACO 82 Street Address (P.O. Box Number is Not Acceptable) 8212 NW 18 PL 83 84 City PLANTATION FL 85 Zip Code 33328			
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE <i>[Signature]</i> DATE 3/20/99 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE 3-4-99 (864) 836-5004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/199)