FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE

## May 14, 2001 8:00 am Secretary of State DOCUMENT # **P98000049095** BPH ROCK COMPANY, INC. 05-14-2001 90222 045 \*\*\*150.00 Principal Place of Business Mailing Address 261 E PROSPECT RD 261 E PROSPECT RD OAKLAND PARK FL 33334 FORT LAUDERDALE FL 33334 2. Principal Place of Business 3. Mailing Address 6191 Orange 191 Orange Ave Suite, Apt, #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE 6159 City & State 4. FEI Number Applied For 65-0840559 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PERINI, VINCENT J O. Box Number is Not Accepta 261 E PROSPECT RD Orange. OAKLAND PARK FL 33334 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 red when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition TITLE TITLE ☐ Delete BRODER, ARTHUR K NAME NAME 6191 ORANGE DRIVE STE 6159-E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33314 X Delete Change Addition TITLE TITLE PERINI, VINCENT J NAME NAME 261 E PROSPECT RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OAKLAND PARK FL 33334 Addition TITLE --Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Arthork. Broder