

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2000 8:00 am
Secretary of State
 05-05-2000 90014 045 ***158.75

DOCUMENT # P99000015621

1. Entity Name

FRH CONSTRUCTION SERVICES, INC.

Principal Place of Business

Mailing Address

6625 MIAMI LAKES DR. E., STE. 200
 MIAMI FL 33014

6625 MIAMI LAKES DR. E., STE. 200
 MIAMI FL 33014-2705

2. Principal Place of Business

3. Mailing Address

3250 WILSHIRE BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LOS ANGELES CA.

4. FEI Number

65-0902744

Applied For

Not Applicable

Zip

Country

Zip

Country

90010

LA.

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324**

Name

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

City

FL

Zip Code

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **TERPIN, KENNETH**
 STREET ADDRESS **260 S. BROAD ST., STE. 1500**
 CITY-ST-ZIP **PHILADELPHIA PA 19102**

TITLE **ASSISTANT SECRETARY** ☐ Change ☒ Addition
 NAME **WESLEY SHIMODA**
 STREET ADDRESS **3250 WILSHIRE BLVD.**
 CITY-ST-ZIP **LOS ANGELES, CA 90010**

TITLE **D** ☐ Delete
 NAME **DIONISIO, JOHN**
 STREET ADDRESS **300 E. 42ND ST.**
 CITY-ST-ZIP **NEW YORK NY 10017**

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

TITLE **D** ☐ Delete
 NAME **GREENSPAN, ELISE**
 STREET ADDRESS **300 E. 42ND ST.**
 CITY-ST-ZIP **NEW YORK NY 10017**

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

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WESLEY SHIMODA

Date

Daytime Phone #

4/29/00

(213) 381-3612

CR2E034 (9/99)