## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 01, 2002 8:00 am Secretary of State

DOCUMENT # P99000015621  1. Entity Name					05-01-2002 91526 028 ***158.75		
· .	ONSTRUCTION SERV	ICES, INC.		<b>&gt;</b>			
	OO NOT WRITE	IN THIS SD					
	O NOT WRITE	IN 1019 9P	ACE				
2. Principal Place of Business 3. Mailing Address 6625 MIAMI LAKES DR. 515 SOUTH FI				ER ST.			
Suite, Apt. #, etc.         Suite, Apt. #, etc.           STE . 200         4TH FLOOR					DO NOT WRITE IN THIS SPACE		
MIAMI,					4. FEI Number Applied For 65-0902744 Not Applied.		
33014	Country Zip 90071		Country	/ · · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	d X \$8.75 Additional Fee Required	
				Name	7. Name and Address of Curren	t Registered Agent	=
	DO NOT WI	RITE		CT COR	PORATION SYSTEM  IS (P.O. BOX Number is Not Accepted)	able)	_
IN THIS SPACE				1200 S	PINE ISLAND R	D.	
	114 11113 37	ACE	-				
				City PLANTA	TION	FL Zip Code 33324	
8. The above	e named entity submits this statemen	t for the purpose of changi	ng its reg	istered office or	registered agent, or both, in the Sta	ate of Florida.	$\neg$
SIGNATURE	-						
****	Signature, typed or printed name of regist		·	·	Agent signature required when reinstatin	g) DATE	긔
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  January 1 - Mi After May 1 Amended Make Check Payable				s \$550.00 s \$61.25	10. Election Campaign F Trust Fund Contribut		
11.	OFFICERS AND D						<u></u> ;
TITLE NAME	PRESIDENT TERPIN, KENNETH		TITLE NAME	·			
STREET ADDRESS	\$ 260 S. BROAD ST. STE 1500			TADDRESS			
CITY - ST - ZIP	PHILADELPHIA, P.	A. 19102	_	ST - ZIP		***	[
TITLE NAME	VICE PRESIDENT DIONISIO, JOHN		TITLE NAME			·	
STREET ADDRESS	605 THIRD AVENUE			TADDRESS			İ
CITY - ST - ZIP	NEW YORK, NY. SECRETARY	10158	CITY - S	ST - ZIP			
title Name	GREENSPAN, ELIS	₹.	TITLE				
STREET ADDRESS	605 THIRD AVENUE		1	FADDRESS	DO NOT	MAIDITE	
CITY - ST - ZiP	NEW YORK, NY. 10158		CITY-8	ST - ZIP	DO NOT WRITE		
TITLE Name	ASSISTANT SECRE:  SHIMODA, WESLEY	FARY	TITLE		IN THIS S	SPACE	
STREET ADDRESS	515 SOUTH FLOWER			ADDRESS			
CITY - ST - ZIP	LOS ANGELES, CA	90071	aty-s	ST - ZIP	·	<u> </u>	
TITLE NAME			TITLE NAME			•	
STREET ADDRESS				ADDRESS			
CITY - ST - ZIP		<del></del>	aty-s	T-ZIP			
TITLE .			TITLE				
STREET ADDRESS			ľ	ADDRESS			
CITY - ST - ZIP			CITY - S	T-ZIP			
an officer o	rtify that the information supplied with n indicated on this report or suppleme or director of the corporation or the rec Block 11 or on an attachment with soft	ntal report is true and accu seiver or trustee-empowers	irate and	that my signatu	re shall have the same local offect.	an if made under sette that I am	
	11/2/				on While	. (010) 500 55	
SIGNATL	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING	NESLI OFFICER C	EY SHIM  OR DIRECTOR	Date ODA	(213) 593-824  Daytime Phone #	<u>₹</u> 2
					Date	Dayung Prione #	- 1

Daytime Phone #