

2000 UNIFORM BUSINESS REPORT (UBR)

9/18/00-90031-029-\$150.00-\$150.00

DOCUMENT # P99000022670

1. Entity Name
D.C. CONSTRUCTION MANAGEMENT, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 OCT -9 PM 12:45

Principal Place of Business Mailing Address
 4110 THIRD AVENUE SOUTHWEST 4110 THIRD AVENUE SOUTHWEST
 NAPLES FL 34119 NAPLES FL 34119
 4110 Third Avenue Southwest 4110 Third Avenue Southwest
 Naples FL 34119 Naples FL 34119



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0901644** Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **Tri-Wealth Corp**

Street Address (P.O. Box Number is Not Acceptable)
3461 Bonita Bay Blvd #214

City **Bonita Springs** **FL** Zip Code **34134**

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 **CARLTON H. SMITH** *[Signature]* 10-5-00
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. **FILE NOW!!! FEE IS \$550.00**
 After SEPTEMBER 13, 2000 Min. will be \$750.00
 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PENSENTI, DONATO V 4110 THIRD AVENUE SOUTHWEST NAPLES FL 34119	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD PENSENTI, DONATA 4110 THIRD AVENUE SOUTHWEST NAPLES FL 34119	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Pensenti, Donato V 4110 Third Avenue Southwest Naples FL 34119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD Pensenti, Donata 4110 Third Avenue Southwest Naples FL 34119	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]* **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

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00086872

D.C. Construction Management, Inc.
4110 Third Avenue SW
Naples, FL 34119

September 8, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

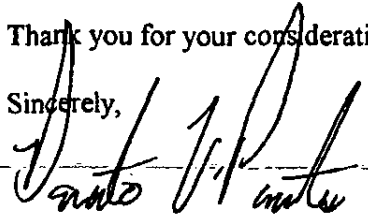
Enclosed is a check for \$150.00 with my 2000 Uniform Business Report. I am asking you to waive the late filing fee.

This would have been the first year for my corporation to receive this report.

I can honestly say that I never received the first notice. After I received the second notice I thought that my registered agent may have received the first notice but after contacting him I was told he had not received it. After checking with the state I was told it should have come to the corporation's place of business. You will notice that on my report I have corrected the spelling of the street in my address. Perhaps this had something to do with my not receiving the first notice.

Thank you for your consideration in this matter.

Sincerely,



Donato Pensenti