

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State
 05-11-2000 90075 029 ***150.00

DOCUMENT # **F99000039902**
 1. Entity Name
MIAMI-DADE CONSTRUCTION REPORTING SERVICES INCORPORATED

Principal Place of Business Mailing Address
775 NE 70th St
MIAMI
FL 33138

C0088143

2. Principal Place of Business 3. Mailing Address
775 NE 70th St, **SAME**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
MIAMI **FL**
 City & State City & State
FL
 Zip Country Zip Country
33138 Country

4. FEI Number **65-0920454** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
STEVEN DEFREZE,
775 NE 70th St,
MIAMI, FL 33138.

7. Name and Address of New Registered Agent
 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 **Steven M. Defreze** president **Steven M. Defreze** (pres) **4/13/02**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

TITLE	President	<input type="checkbox"/> Delete
NAME	Steven Defreze	
STREET ADDRESS	775 NE 70th St	
CITY-ST-ZIP	Miami FL 33138	
TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Caroline J. Defreze	
STREET ADDRESS	775 NE 70th Street	
CITY-ST-ZIP	Miami FL 33138	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Vice President	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Caroline J. Defreze	
STREET ADDRESS	775 NE 70th St	
CITY-ST-ZIP	Miami FL 33138	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: **Steven M. Defreze** **4/13/02** (305) 758-9861
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)