

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000053717

1. Entity Name

**CONSTRUCTION SERVICES & MANAGEMENT, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**4980 Southwest 195 Terrace**

Suite, Apt. #, etc.

3. Mailing Address

**4980 Southwest 195 Terrace**

Suite, Apt. #, etc.

City & State

**Fort Lauderdale, Florida**

City & State

**Fort Lauderdale, Florida**

Zip

**33332**

Country

Zip

**33332**

Country

4. FEI Number

**65-0929951**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
- Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

**SPIEGEL & UTRERA, P.A.**

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

**1840 Southwest 22 Street**

**4th Floor**

City

**Miami**

**FL**

Zip Code

**33145**

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 fee if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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-STATE-ZIP  
**PSTD  
Delee, Victoria M.  
4980 Southwest 195 Terrace  
Fort Lauderdale, Florida 33332**

TITLE  
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CITY-STATE-ZIP

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IN THIS SPACE**

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 included 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 on an amendment with an address, with all other duly empowered.

SIGNATURE: *Victoria M. Delee* 11/19/02 Victoria M. Delee, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Printed

CR2E034B (12/01)

272

**AFFIDAVIT IN SUPPORT OF**  
**REQUEST TO WAIVE THE**  
**FLORIDA DEPARTMENT OF STATE**  
**CORPORATE ANNUAL REPORT LATE FEES**

STATE OF FLORIDA     )  
                                  )  
COUNTY OF BROWARD    )

1. Victoria M. Delee is the President of CONSTRUCTION SERVICES & MANAGEMENT, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation was administratively dissolved by the Florida Department of State on October 4, 2002.
3. That the Corporation failed to file its 2002 Annual Report or pay the 2002 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
  - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
  - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2002 Annual Report fees and the filing of its 2002 Annual Reports, which are presented simultaneously with this Affidavit.
5. CONSTRUCTION SERVICES & MANAGEMENT, INC. satisfies the requirements of the Florida Statutes 607.0401.
6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 7th day of November, 2002

**FURTHER, AFFIANT SAYETH NOT**

CONSTRUCTION SERVICES &  
MANAGEMENT, INC.

By: *Victoria M. Delee*  
Victoria M. Delee, President

**SWORN AND SUBSCRIBED**  
before me this 7 day of November, 2002.



Claudia Alexander  
MY COMMISSION # CC991204 EXPIRES  
February 13, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.

*Claudia Alexander*  
Notary Public, State of Florida at Large  
Printed Name: Claudia Alexander  
Commission Expires: 2/13/05