

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90139 009 ***150.00

01/11/2002 AV

DOCUMENT # P99000106437

1. Entity Name

WRK & SONS CONSTRUCTION, INC.

Principal Place of Business

**5887 N.W. 71ST TERRACE
 PARKLAND FL 33067**

Mailing Address

**5887 N.W. 71ST TERRACE
 PARKLAND FL 33067**

2. Principal Place of Business

6150 N.W. 60 AVE.

3. Mailing Address

6150 N.W. 60 AVE.

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

PARKLAND, FLORIDA

City & State

PARKLAND, FLORIDA

Zip

33067

Country

USA

Zip

33067

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0966100

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

KERN, CINDY

**5887 N.W. 71ST TERRACE
 PARKLAND FL 33067**

7. Name and Address of New Registered Agent

Name

KERN, WILLIAM R.

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

6150 N.W. 60 AVE.

City

PARKLAND

FL

Zip Code

33067

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

William R. Kern

WILLIAM R. KERN, PRESIDENT

3/13/02

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, 2002 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 **D** ☐ Delete
 NAME **KERN, WILLIAM ROBERT**
 STREET ADDRESS **5887 N.W. 71ST TERRACE**
 CITY-ST-ZIP **PARKLAND FL 33067**

TITLE **P** ☐ Delete
 NAME **KERN, WILLIAM R**
 STREET ADDRESS **5887 NW 71 TERRACE**
 CITY-ST-ZIP **POMPAÑO BEACH FL 33067**

TITLE **SD** ☐ Delete
 NAME **KERN, CINDY D**
 STREET ADDRESS **5887 NW 71 TERRACE**
 CITY-ST-ZIP **POMPAÑO BEACH FL 33067**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **KERN, WILLIAM R.**
 STREET ADDRESS **6150 N.W. 60 AVE**
 CITY-ST-ZIP **PARKLAND, FL. 33067**

TITLE **P** ☒ Change ☐ Addition
 NAME **KERN, WILLIAM R.**
 STREET ADDRESS **6150 NW 60 AVE**
 CITY-ST-ZIP **PARKLAND, FL 33067**

TITLE **SD** ☒ Change ☐ Addition
 NAME **KERN, CINDY D.**
 STREET ADDRESS **6150 NW 60 AVE**
 CITY-ST-ZIP **PARKLAND, FL. 33067**

TITLE **T/D** ☐ Change ☒ Addition
 NAME **KERN, JR. WILLIAM R.**
 STREET ADDRESS **6150 NW 60 AVE**
 CITY-ST-ZIP **PARKLAND, FL. 33067**

TITLE **V** ☐ Change ☒ Addition
 NAME **DANIEL M. KEEN**
 STREET ADDRESS **6150 N.W. 60 AVE**
 CITY-ST-ZIP **PARKLAND, FL. 33067**

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 power like empowered.

SIGNATURE:

William R. Kern

WILLIAM R. KERN

President/Director

3/13/02

**954
 227-2264**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)