

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # S32563

(6)

95 JAN 17 PM 1:16

1. Corporation Name

CAMPBELL BUILDING SERVICE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
9999 NW 7 AVE MIAMI FL 33150		9999 NW 7 AVE MIAMI FL 33150	
21. State	26. State	27. City	30. Country
FL	FL	MIAMI	USA
22. City	27. State	28. City	30. Country
MIAMI	FL	MIAMI	USA
24. Zip	25. Country	28. Zip	30. Country
33150	USA	33150	USA

3. Date Incorporated or Qualified	3a. Date of Last Report
02/18/1991	01/20/1994
4. FEI Number	Applied For
65-0275774	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
☐ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent											
TICE, JAMES E. 9999 NW 7 AVE MIAMI FL 33150		<table border="1"> <tr> <td>81. Name</td> <td></td> </tr> <tr> <td>82. Street Address (P.O. Box Number is Not Acceptable)</td> <td></td> </tr> <tr> <td>83. City</td> <td></td> </tr> <tr> <td>84. State</td> <td>85. Zip Code</td> </tr> <tr> <td>FL</td> <td></td> </tr> </table>		81. Name		82. Street Address (P.O. Box Number is Not Acceptable)		83. City		84. State	85. Zip Code	FL	
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82. Street Address (P.O. Box Number is Not Acceptable)													
83. City													
84. State	85. Zip Code												
FL													

11. Pursuant to the provisions of Sections 607.0802 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. Such change was authorized by the corporation's board of directors. Thereby, accept the appointment as registered agent. I am hereby accepting the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	D CAMPBELL, LORNE C. 9999 NW 7 AVE MIAMI FL	NAME	☐ Change ☐ Addition
ADDRESS	D CAMPBELL, MARY 9999 NW 7 AVE MIAMI FL	ADDRESS	☐ Change ☐ Addition
NAME	D TICE, JAMES E. 631 NW 15TH ST. HOMESTEAD FL	NAME	☐ Change ☐ Addition
ADDRESS		ADDRESS	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		ADDRESS	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		ADDRESS	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		ADDRESS	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
ADDRESS		ADDRESS	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in section 199.032, Florida Statutes. I further certify that the information is correct and that the annual report or supplemental annual report is true and accurate and that my signature is authentic and has the same legal effect as if made under oath. If the information is not correct or if the corporation is not in good standing, I am hereby accepting the report as required by Chapter 199, Florida Statutes, and that my name appears on the report as required by Chapter 199, Florida Statutes, and that my name appears on the report as required by Chapter 199, Florida Statutes.

SIGNATURE: *Lorne C. Campbell*
INITIALS AND TYPED OR PRINTED NAME: LORNE C. CAMPBELL
SIGNING OFFICER IS ON DIRECTOR

1-10-95 7540551