

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90019 014 ***158.75

DOCUMENT # S67331

1. Entity Name
C W CONSTRUCTION, INC.

C0011787



DO NOT WRITE IN THIS SPACE

Principal Place of Business
1022 N.W. 54TH STREET
MIAMI FL 33127

Mailing Address
1022 N.W. 54TH STREET
MIAMI FL 33127-1820

2. Principal Place of Business
1000 NW 54th Street

3. Mailing Address
1000 NW 54th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, FL 33127

City & State
Miami, FL

4. FEI Number
65-0285807

Applied For
 Not Applicable

Zip
33127

Country

Zip
33127

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIS, CHARLOTTE Y.
1022 N.W. 54TH STREET
MIAMI FL 33127

Name

Street Address (P.O. Box Number is Not Acceptable)
1000 NW 54th Street

City **Miami**

FL

Zip Code
33127

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 *Charlotte Y. Willis, President*
 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DP
WILLIS, CHARLOTTE Y.
1022 NW 54TH ST.
MIAMI FL

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☒ Change ☐ Addition
1000 NW 54th St
MIAMI, FL 33127

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S
LACOVA, LU ANN
1022 NW 54TH ST
MIAMI FL 33127

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☒ Change ☐ Addition
1000 NW 54th St
Miami, FL 33127

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)