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## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 27, 2001 8:00 am Secretary of State **DOCUMENT # V53996** 1. Entity Name RENAISSANCE CONSTRUCTION CORPORATION 04-27-2001 90226 027 \*\*\*158.75 Principal Place of Business Mailing Address 736 KEENELAND PIKE 736 KEENELAND PIKE LAKE MARY FL 32746 LAKE MARY FL 32746 HS 169 East Ridge Village Orie 169 East Village Drive Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3137137 Miami miam. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Micmi Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent A. Graziono GRAZIANO, JAMES A Street Address (P.O. Box Number is Not Acceptable) 736 KEENELAND PIKE LAKE MARY FL 32746 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. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete NAME GRAZIANO, JAMES A 169 East Ridge Village Orice Miami FL 33157 STREET ADDRESS STREET ADDRESS 736 KEENELAND PIKE CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL TITLE ☐ Delete TITLE NAME NAME GRAZIANO, ROSALINDA S. STREET ADDRESS STREET ADDRESS 736 KEENELAND PIKE CITY-ST-ZIP CITY-ST-ZIP LAKE MARY FL 32746 TITLE ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 other like empowered.

president James A. Graziana 3-23-01