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MAY 23 11:10:15

STATE OF FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
Division of Corporations

DOCUMENT # 597036 (3)
ABC CUTTING CONTRACTORS OF ATLANTA, INC.

Principal Office of Business: **2001 ANDREWS AVENUE POMPANO BEACH FL 33069**
Mailing Address: **2001 ANDREWS AVENUE POMPANO BEACH FL 33069**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or latest: **12/12/1978** 3a. Date of Last Report: **03/14/1994**
4. FEI Number: **59-1732467** Apples for 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 is presently in compliance for under § 199.009, Florida Statutes: Yes No

2. Principal Office of Business: 2a. Mailing Address
21. State, Apt. # etc. 26. State, Apt. # etc.
22. City & State 27. City & State
23. City & State 28. City & State
24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent
**BULLY, BRAD
BROWARD FINANCIAL CTR, STE 460
500 E BROWARD BLVD
FT LAUDERDALE FL 33394**

10. Name and Address of New Registered Agent
B1. Name
B2. Street Address (P.O. Box Number is Not Applicable)
B3.
B4. City
B5. Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0802 and 607.1908, Florida Statutes, this above named corporation certifies this statement for the purposes of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0805, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME: PD MCCOY, LARRY W. STREET ADDRESS: 2001 ANDREWS AVENUE POMPANO BEACH FL CITY & STATE: POMPANO BEACH FL		1. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: ST MCCOY, FAITH STREET ADDRESS: 2001 ANDREWS AVENUE POMPANO BEACH FL CITY & STATE: POMPANO BEACH FL		2. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: V MCCOY, TERRY STREET ADDRESS: 2001 ANDREWS AVENUE POMPANO BEACH FL CITY & STATE: POMPANO BEACH FL		3. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: _____ STREET ADDRESS: _____ CITY & STATE: _____		4. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: _____ STREET ADDRESS: _____ CITY & STATE: _____		5. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: _____ STREET ADDRESS: _____ CITY & STATE: _____		6. TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and does not qualify for the exemption stated in Section 199.001(1)(b), Florida Statutes. I further certify that the information contained on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effect as if made under oath. I am familiar with and accept the obligations of the provisions of Sections 199.001(1)(b) and 199.009, Florida Statutes, and that my name appears on Block 1, 2, or Block 3 of a corporation or an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR