

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 681458

1. Entity Name
LANZO CONSTRUCTION CO., FLORIDA



Principal Place of Business
1900 NW 44 STREET
POMPANO BCH, FL 33064

Mailing Address
1900 NW 44 STREET
POMPANO BCH, FL 33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03312004

Chg-P

CR2E034 (10/03)

4. FEI Number
59-2011933

Applied For
Not Applicable

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

D'ALESSANDRO, GUISEPPE
1900 NW 44TH ST
POMPANO BEACH, FL 33064

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME D'ALESSANDRO, QUIRINO
STREET ADDRESS 17455 IRIS CR.
CITY-ST-ZIP CLINTON TOWNSHIP, MI

TITLE AS ☐ Change ☒ Addition
NAME Halverson, Richard J.
STREET ADDRESS 7484 La Paz Place #203
CITY-ST-ZIP Boca Raton, FL 33433

TITLE VS ☐ Delete
NAME D'ALESSANDRO, QUISEPPE
STREET ADDRESS 6208 NW 72ND WAY
CITY-ST-ZIP PARKLAND, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VT ☐ Delete
NAME D'ALESSANDRO, ANGELO
STREET ADDRESS 6689 NW 26TH WAY
CITY-ST-ZIP BOCA RATON, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME TILLI, MATTHEW P
STREET ADDRESS 8302 NW 37TH STREET
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME BEATY, ROBERT 111
STREET ADDRESS 1864 GOLFVIEW
CITY-ST-ZIP S. DAYTONA, FL 32119

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ Delete
NAME DALESSANDRO, ANTONIO
STREET ADDRESS 21788 REFLECTION LANE
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 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 #

3/31/04 984-979-0802

FILED

04 APR 12 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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