

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90012 010 \*\*\*150.00

**DOCUMENT # 853047**

1. Entity Name

ANGELO IAFRATE CONSTRUCTION COMPANY



Principal Place of Business

26400 SHERWOOD  
WARREN MI 48091

Mailing Address

26400 SHERWOOD  
WARREN MI 48091

54007391



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
38-1894432

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

WILLIAMS, ROBERT  
380 WEST ALFRED STREET  
TAVARES FL 32778

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

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 PD ☒ Delete  
NAME IAFRATE, ANGELO  
STREET ADDRESS 1719 GUNN ROAD  
CITY-ST-ZIP ROCHESTER MI

TITLE PD ☐ Change ☒ Addition  
NAME ANGELO E. IAFRATE  
STREET ADDRESS 26400 SHERWOOD AVE.  
CITY-ST-ZIP WARREN, MI 48091

TITLE VD ☐ Delete  
NAME IAFRATE, DOMINIC  
STREET ADDRESS 1528 STONY CREEK DR.  
CITY-ST-ZIP ROCHESTER MI

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

TITLE S ☒ Delete  
NAME IAFRATE, ANGELO, JR.  
STREET ADDRESS 69659 RIVERBEND LANE  
CITY-ST-ZIP ARMADA MI 48005

TITLE S ☐ Change ☒ Addition  
NAME MICHAEL KIEHNAU  
STREET ADDRESS 26400 SHERWOOD AVE  
CITY-ST-ZIP WARREN, MI 48091

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

ANGELO E. IAFRATE

2 FEB 2004

586-427-4650

Date

Daytime Phone #