

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F59872** (4)
1. Corporation Name
BOB CURRAN & SONS CORP.



Principal Place of Business 2208 N. 20TH AVENUE HOLLYWOOD FL 33020 US	Mailing Address 2208 N. 20TH AVENUE HOLLYWOOD FL 33020 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 12/23/1981		4. FEI Number 65-0270443		Applied For Not Applicable	
5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		6. Election Campaign Financing Trust Fund Contribution ☐		6. Election Campaign Financing Trust Fund Contribution ☐		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This Corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No		8. This Corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No		8. This Corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No		8. This Corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No		8. This Corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent CURRAN, ROSELINE L 830 S. NORTH LAKE DR. HOLLYWOOD FL 33019				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	ST	NAME	CURRAN, EDWARD L.	1.1 TITLE		1.1 NAME	
STREET ADDRESS		STREET ADDRESS	830 S. NORTH LAKE DR.	1.2 STREET ADDRESS		1.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	HOLLYWOOD FL	1.3 CITY-ST-ZIP		1.3 CITY-ST-ZIP	
TITLE	P	NAME	CURRAN, ROSELINE L.	2.1 TITLE		2.1 NAME	
STREET ADDRESS		STREET ADDRESS	830 S. NORTH LAKE DR.	2.2 STREET ADDRESS		2.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	HOLLYWOOD FL	2.3 CITY-ST-ZIP		2.3 CITY-ST-ZIP	
TITLE		NAME		3.1 TITLE		3.1 NAME	
STREET ADDRESS		STREET ADDRESS		3.2 STREET ADDRESS		3.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP		3.3 CITY-ST-ZIP		3.3 CITY-ST-ZIP	
TITLE		NAME		4.1 TITLE		4.1 NAME	
STREET ADDRESS		STREET ADDRESS		4.2 STREET ADDRESS		4.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP		4.3 CITY-ST-ZIP		4.3 CITY-ST-ZIP	
TITLE		NAME		5.1 TITLE		5.1 NAME	
STREET ADDRESS		STREET ADDRESS		5.2 STREET ADDRESS		5.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP		5.3 CITY-ST-ZIP		5.3 CITY-ST-ZIP	
TITLE		NAME		6.1 TITLE		6.1 NAME	
STREET ADDRESS		STREET ADDRESS		6.2 STREET ADDRESS		6.2 STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP		6.3 CITY-ST-ZIP		6.3 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or on an attachment with an address.

SIGNATURE: *SK* ROSELINE L. CURRAN PRES. 1-26-98 (954) 932-4551

CR2E034 (10/97)