

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04269 (7)

1. Corporation Name

SUNBELT CONSTRUCTORS INC.



Principal Place of Business

6833 KIRBYVILLE
P O BOX 330407
HOUSTON TX 77233

Mailing Address

6833 KIRBYVILLE
P O BOX 330407
HOUSTON TX 77233

3. Date Incorporated or Qualified

12/06/1984

3a. Date of Last Report

03/17/1995

4. FEI Number

76-0089107

Applied 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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

Signature of Registered Agent (Required for Change of Agent)

Signature of Registered Agent (Required for Change of Agent)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1. TITLE	☐ Change ☐ Addition
NAME	NOWLAND, R. A.	2. NAME	
STREET ADDRESS	6833 KIRBYVILLE	3. STREET ADDRESS	
CITY- ST- ZIP	DALLAS TX	4. CITY- ST- ZIP	
TITLE	S	5. TITLE	☒ Change ☐ Addition
NAME	RUIZ, W C	6. NAME	
STREET ADDRESS	6833 KIRBYVILLE	7. STREET ADDRESS	
CITY- ST- ZIP	DALLAS TX	8. CITY- ST- ZIP	
TITLE	D	9. TITLE	☒ Change ☐ Addition
NAME	WILSON, J M	10. NAME	
STREET ADDRESS	6833 KIRBYVILLE	11. STREET ADDRESS	
CITY- ST- ZIP	DALLAS TX	12. CITY- ST- ZIP	
TITLE		13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY- ST- ZIP		16. CITY- ST- ZIP	
TITLE		17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY- ST- ZIP		20. CITY- ST- ZIP	
TITLE		21. TITLE	☐ Change ☐ Addition
NAME		22. NAME	
STREET ADDRESS		23. STREET ADDRESS	
CITY- ST- ZIP		24. CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed; or on an attachment with an address.

SIGNATURE:

William C Ruiz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William C Ruiz

4/30/96

DATE

713-644-1247

TELEPHONE NUMBER

CR2E034 (12/95)