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

**PROFIT CORPORATION** ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # **P94000068707** 

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90249 020 \*\*\*150.00

BLAKE (	CONTRACTING, INC	•											
Principal Place	e of Business		Mailing Address					Ligg	ittäät ina saiti arais aann i	<b>78</b> 111 <b>48</b> 111 <b>83</b> 1	18 Biles (81)1 18815 1	B()     B	
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2. Principa Pi	ace of Business		a. Mailing Addres	5			1	65-052				Applicable	l
Suite Art	# ptc	20	Suite, Apt. #, et					00 002	.0102		\$8.75 A		l
Suite, Ant. #, etc.		2	27			!	5. Certifc to	e of Status Desired		Fee Re			
City & State			City & State				6 Flection	Campaign Financing		\$5.00	May Be	1	
23	•	21	¬ ´				'		nd Contribution	' <sub>□</sub>	Added to		
Zip	Cour try	<del></del>	Zip	Co	untry			8. This corp	poration owes the cu	rrent year	ntangible		
24	25	29	5	30				Persor al	Property Tax.		☐ Yes	□No	İ
	9. Name and Address	of Current Reg	istered Agent				11	0. Name a	nd Address of New	Registere	d Agent		
DI 41	C OUDIOTIAN D				81	Name							
	KE, CHRISTIAN B				82	Street	Ac dress	(P.O. Box N	Number is Not Accep	table)			l
	SW 9TH ST							·					-
rı L	AUDERDALE FL 33315				83								
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office ⇔r r	to the provisions of Section egistered agent, or both, in m familiar with, and accept	the State of Flo	rida. Such change	was authorize	ea by	tne corp	pration's	board of dir	ectors. I hereby acc	ept the app	ointment as reg	gistered	
SIGNATUF E									_				1
	Signature, typed or printed name of			(NOT E: Register		nt signature r	equired whe		NS/CHANGES TO O	DATE	AND DIRECTO	DC IN 12	é
12.	<del>_</del>	ICERS AND DI	RECTORS DELI	13	TITLE		Γ	ADDITIO	NS/CHANGES TO C	FFICERS	Change	Addition	1
TITLE	D BLAVE CHRISTIAN R							$\rho_{i\ldots}$	1 × ×		og.		`
NAME	BLAKE, CHRISTIAN B DDRESS 400 SW 9TH ST				1.3 STREET ADDRE		Blake, Christian is 421 5W 13th St					8	
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NAME				6.2	NAME								
CTDEET ADDRESS				6.3	STREE	TADDRESS							

6.4 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)(i), 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE: