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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000031466

BCM CONSTRUCTION, INC.

## FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90031 026 \*\*\*150.00



Principal Place of Business  Mailing Address  15287 67TH CT. N.  LOXAHAHTCHEE FL 33470  LIS  DO NOT WRITE IN THIS S		
LOXAHAHTCHEE FL 33470 LOXAHAHTCHEE FL 33470		
DO NOT WRITE IN THIS S		
	SPACE	
US 3. Date Incorporated or Qualified		-5
04/10/1996		
2. Principal Place of Business 2a. Mailing Address 4. FEI Number		Applied For
21 65-0657536		Not Applicable
Suite Apt # etc.	\$8.7	5 Additional
5. Certificate of Status Desired	Fee	Required
City & State City & State 6. Election Campaign Financing	\$5.0	0 May Be
23 Trust Fund Contribution	Adde	ed to Fees
Zip Country Zip Country 8. This corporation owes the current year Inta		-/
24 [25] · [29] [30] · [35] · [35]	☐ Yes	ØMo
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered A	Agent	
BICKLIDIAK MICKEY		
BISKUPIAK, MICKEY  82 Street Address (P.O. Box Number is Not Acceptable)		
15287 67TH CT. N.		
LOXAHATCHEE FL 33470		
84 City	85 Z	ip Code
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 control of the purpo	بلل	
11. Pursuant to the provisions of Sections out 1502 and 507.1505, Florida Statutes, tile abovernance corporation's board of directors: I hereby accept the appoint of our registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		, rogiotorou
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE		
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IGNATURE AND APPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phls.

3 25 99 961- 7937543