PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V18578 1. Corporation Name

DANFIS CONSTRUCTION CO. INC.

DANFIS CONSTRUCTION CO. NC. Changed to:
Dan. Fis Construction co. + Associates Enc.

Feb 22, 1999 8:00 am Secretary of State 02-22-1999 90028 005 ***150.00

	ce of Business	Mailing Address				***************************************	
925-5 SEMORA	AN BLVD.	1605 FREDRICA BLVD.					
120	£1 22702	ORLANDO FL 32812			DO NOT WOITE	IN THE CDACE	
winter park US	FL 32/92				3 Date Incorporated or Qualifed	IN THIS SPACE	
00					03/03/1992		
2 Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21 140		Za. Walling Address			59-3166081	<u> </u>	Not Applicable
Suite, Apt		Suite, Apt. #, etc.			T	\$8.7	5 Additional
22 H		27		 .	5. Certifcate of Status Desired	Fee	Required
City & Sta	Ando FL. Ovange	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be
Zip _	Country	Zip	Country		8. This corporation owes the curren	t year Intangible	
24 328	07 25	29	30		Personal Property Tax.	☐Yes	□No
	9. Name and Address of Current I	Registered Agent			10. Name and Address of New Reg	istered Agent	
			81	Name			
	DANIEL DOMINGUEZ		82	Street Add	ress (P.O. Box Number is Not Acceptable	e)	
1605 FREDRICA DR			02	Olleet Add	iless (1 .O. box 140/liber is 140/ Acceptable	-)	
ORL	ANDO FL 32812		83				
-	5				- <u>-</u>		
			84	City		FL 85 21	ip Code
SIGNATURE	grature, typed of printed name of registered agent a		 -		Sident 16 ed when reinstating)	JATE DATE	
12.	OFFICERS AND						
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14. Thereby 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 truster 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 exemption of the report as required by Chapter 607.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP