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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000055817 (7) **DOCUMENT #** 

BALZ-RAMPY CONSTRUCTION, INC.

Principal Place of Business Mailing Address								i indicati ciù idiài milli ngili da	<b>42</b> 111 <b>8319</b> 1 <b>9</b> 1		., ,414	· ., 217 / 247 / 224	
505 E. AMELIA STREET ORLANDO FL 32803			505 E. AMELIA STREET ORLANDO FL 32803										
								3. Date Incorporated or Qualified 07/17/1995	3a. Date	of Las	t Rep	port	
2. Principal Plac	ce of Business	2a.	Mailing Address					4. FEI Number	7			pplied For	
21		26						59-332616	<u> </u>			ot Applicable	
Suite, Apt. #.	, etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required			
22		27						- Floring Committee Character					
City & State		20	Oity & State					Election Campaign Financing     Trust Fund Contribution				May Be to Fees	
<b>Z</b> ip	Country	28	7 <sub>1</sub> p		Country	,		8. This corporation has liability for	intangible tax				
24			30					Florida Statutes					
	9. Name and Address of Current	Regis	tered Agent		Ţ.,			10. Name and Address of New I	Registered A	gent			
					81	١	lame						
	, Barry L				82	5	Street Addr	ess (P.O. Box Number is Not Accepta	ole)				
	MARKS STREET					ļ							
ORLAN	DO FL 32803				63								
	•				84	1	Dity			85	Zip	Code	
			- 1665 60 00 000			<u>L.</u>	und name	ation submits this statement for the purel of directors. I barety accept the an	roceo of cha	noina	its re	nistered office	
SIGNATURE	h, and accept the obligations of, Sections of Sections of Sections of Systems are the OFFICERS AND	ar⊧Ithic d	of the other. (N	்டு இத	hi od Aarg	15.	වූ ක්රාර් 'ම ලැබේ	d when received high  ADDITIONS/CHANGES TO OF	DATE ICERS AND	DIRE	стог	RS IN 12	
TITLE	PD		DELETE		1 1 TITLE	_				] Chai		Addition	
NAME	RAMPY, PHILIP				1.2 NAME								
STREET_ADDRESS	505 E. AMELIA STREET				1.3 STREET	LA0	ORESS						
CITY-ST-ZIP	ORLANDO FL 32803				1.4 CITY - 9	\$1-2	ZIP						
TITLE	STD		DELETE		2 1 T.TLE					] Cha	rge	Addition	
NAME .	BALZ, JERRY				2.2 NAME								
STREET ADDRESS	505 E. AMELIA STREET			1	2 3 STPEE								
CITY-ST-ZIF	ORLANDO FL 32803		DELETE		2.4 CITY - 5 3.1 TIT; E		ZIP			] Cha	noe	Addition	
TITLE	VD ABBATICCHIO, ROBERT C		□ betere		3 2 NAME		7						
NAME	505 E. AMELIA STREET			1	3.3 STREE			•					
STREET ADDRESS	ORLANDO FL 32803				34 C TY-1								
CITY-ST-ZIP TITLE	☐ DELETE			4 TITUE		24			Cha	nge	☐ Addition		
NAME			<del></del>		4.2 NAME								
STREET ADDRESS					43STFEF	-1 A(	ODRESS						
CITY-ST-ZIP					4.4 CITY -	51-	ZIP						
TITLE			DELETE						[	Cha	nge	Addition	
NAME					5.2 NAME								
STREET ADDRESS					5 3 STREE	I AE	DDRESS						
CITY-ST-ZIP					5 <b>4 C</b> ITY -		7-P	<b>7000017</b> -04/09/9601	743.	27	•		
TITLE		_	☐ DELETE		6 1 THILE			-04/09/9601	11605	<b>. 4</b> Cha	inge	Addition	
NAME				1	6.2 NAME			###280_0B					

6.3 STREET ADDRESS

6 4 CITY - ST - ZIF

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

14. If do hereby certify that the information supplied with this filing is voruntarily furnished and closs not qualify for the exemption stated in Soction 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplements annual report is true and accurate and that my signature shall have the same legal effect as if made under cath, that I am an officer or director of the corporation or trie receiver or trustee empowered to execute this report required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed if on any stactment with an address.

CR2E034 (12/95)