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 # 343553

FLORIDA ROCK AND SAND COMPANY, INC.

Principal Place	e of Business	Mailing Address						
15900 SW 408TH ST 15900 SW 408TH								
FLORIDA CITY FL 33034		FLORIDA CITY FL 33034			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		
						03/25/1969		J
		10-14-15-44				4. FEI Number		oplied For
2. Principal P	lace of Business	2a. Mailing Address						ot Applicable
21		26				59-1274059		Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		equired
22	<u></u>	27						
City & Stat	e e	City & State				6. Election Campaign Financing		May Be to Fees
23		28	Count			Trust Fund Contribution		101600
, Zip	Country	Zip	_	ıy		8. This corporation owes the current year Int	Tes	□No
24	25	_ 	10			Personal Property Tax. 10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent		1 Nam		IV. Haite and Address of New Togistores	Agont	
TOP	CISE,STEVE				,]
15900 S.W.408TH ST.				2 Stree	t Addre	Address (P.O. Box Number is Not Acceptable)		
			L					
P.O.BOX 3004 FLORIDA CITY FL 33034				3		j		
FLU	RIDA CITT FL 33034		Fe Fe	4 City			85 Zip	Code
]] '		<u>_ F</u> L	<u>- </u>	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s the abo	ve-name	d corpo	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoint	changing its	registered
office or r	registered agent, or both, in the State (im familiar with, and accept the obligat	of Florida, Such change was autions of, Section 607,0505, Florid	inonzed t da Statuti	oy≀neco es.	poration	n's goard of directors. Thereby accept the appoin	mungin as re	,gioloica
•	,	,						Ì
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: I	Registered A	gent signatu	e required	when reinstating) DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	C DELETE		1.1 TITLE		ļ		Change	Addition
NAME	TORCISE, STEVE SR.	SR.		1.2 NAME				j
STREET ADDRESS	17900 SW 288TH STREET		1.3 STREET ADDRESS		s			
CITY-ST-ZIP	HOMESTEAD FL		1.4 CITY	1.4 CITY-ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITL	 E	7-		Change	☐ Addition
NAME	TORCISE, ADELL		2.2 NAM	E				
STREET ADDRESS	47000 CM ODOTH CTDCET			EET ADORES	s)
	HOMESTEAD FL	مان المساور الما	2.4 CITY-ST-ZIP			المنافر المعود المالي المنافر		
CITY-ST-ZIP TITLE	P	☐ DELETE	3.1 TITLE		-		[] Change	Addition
	TORCISE, STEVE JR.		3.2 NAM		1			
NAME	AGOO ON AGACT OTDETT			EET ADDRE	.e		•	
STREET ADDRESS	l .				٠ [
CITY-ST-ZIP	MIAMI FL	[] DELETE	3.4. Can 4.1 Titu	/-ST-ZIP	+-		Change	Addition
TITLE	STD POICE PICK	L] DECEIE			-		C1 +90	
NAME	TORCISE, RICK		4. 2 NA	-				
STREET ADDRESS			1	EET ADORE	S			
CITY-ST-ZIP	HOMESTEAD FL			-ST-ZIP	 		Charter -	[] Addition
TITLE		☐ DELETE	5.1 TITL				Change	Addition
NAME	1		52 NAM					1
STREET ADDRESS	s (5.3 STR	EET ADDRE	ន			

14. 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 esciver 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.

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

9

CITY-ST-ZIP

STREET ADDRESS

NAME

Change

Addition

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90229 028 ***158.75