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

**PROFIT** CORPORATION ANNUAL REPORT 1999

AETNA DRYWALL CONTRACTORS, INC.

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State\_ DIVISION OF CORPORATIONS

## FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90125 025 \*\*\*158.75

										<b>                                    </b>
Principal Place of Business Mailing Address							1 100133 11110 11001 10111 18010 1			
3061 N.W. 23RD TERRACE		3061 N.W. 23RD TERRACE								
FT. LAUDERDALE FL 33311			FT. LAUDERDALE FL 33311				DO NOT WRITE IN THIS SPACE			
						-		TE IN THIS	SPACE	
							3. Date Incorporated or Qualifed			[
	Control of Decision of Decisio	Do Marilina Ada					04/12/1968 4. FEI Number			plied For
<b>─</b> , '	lace of Business	— "	2a. Mailing Address				59-1206999		f - 4	t Applicable
21	# ota	26 Suite Ant 1	Suite, Apt. #, etc.				39-1200999	1 .	\$8.75 A	
Suite, Apt. #, etc.		— — · · ·	1			İ	5. Certifcate of Status Desired	X	Fee Re	
City & State		27 City & State	City & State				6. Election Campaign Financing	<u>,                                     </u>	\$5.00	May Bo
23		28	¬ `			ļ	Trust Fund Contribution		Added to	
Zip Country		Zip					8. This corporation owes the cur	rent year Inta	angible	
24	25	30				Personal Property Tax.	•		No	
	9. Name and Address of Curre	ent Registered Agent	:				10. Name and Address of New	Registered .	Agent	
				81	Name					-
	KINS, ROBERT F			82	Street	Address	s (P.O. Box Number is Not Accept	able)		
	NW 23RD TERR.		ļ			7,00,000				_
FT.L	AUDERDALE FL 33311									
				84	City				85 Zip C	ode
					,			<u>FL</u>		
office or re	to the provisions of Sections 607.03 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such chai	nge was autho:	rized by	the corp	corpora oration's	ation submits this statement for the s board of directors. I hereby acce	purpose or pt the appoir	changing its itment as reg	registered gistered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Regi	stered Ager	nt signature	required w	nen reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS		13.			ADDITIONS/CHANGES TO OF	FICERS AN		RS IN 12
TITLE	PD		DELETE	1.1 TITLE					☐ Change	Addition
NAME	WATKINS, ROBERT F			1.2 NAME						Ì
STREET ADDRESS	3061 N.W. 23 TERR.			1.3 STREET	T ADDRESS	i				
CITY-ST-ZIP	FT.LAUDERDALE FL			1.4 CITY-S	T- ZIP	↓—			Change	Addition
TITLE	\$	Ш		2.1 TITLE					Change	Addition
NAME	CLABURN, SARAH E.			2.2 NAME						
STREET ADDRESS	3061 NW 23RD TERR.			2.3 STREE	FADDRESS					
CITY-ST-ZIP	FT.LAUDERDALE FL			2. 4 CITY-S	T-ZIP	ļ			- Chanca	Addition
TITLE				3.1 TITLE					Change	C. Addition
NAME	-			3.2 NAME						ļ
STREET ADDRESS				3.3 STREE	TADDRESS	i				
CITY-ST-ZIP				3.4. CITY-5	T-ZIP	<u> </u>			Change	Addition
TITLE				4.1 TITLE					Change	L. Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREE	TADDRESS	• [				
CITY-ST-ZIP				4.4 CITY-S	T-ZIP	<u> </u>			Change	☐ Addition
TITLE			ľ	5.1 TITLE					Change	
NAME				5.2 NAME						
STREET ADDRESS					TADDRESS	·				
CITY-ST-ZIP				5.4 CITY-S	T-ZIP	<b></b>			Change	Addition
TITLE		Li	J222.2	6.1 TITLE					☐ Change	
NAME				6.2 NAME						
STREET ADDRESS			ľ	6.3 STREE	T ADDRESS	<i>i</i>				ì

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 Changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS