

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
May 31 1996 8:00 am  
Secretary of State

DOCUMENT # **343553** (4)

1. Corporation Name

**FLORIDA ROCK AND SAND COMPANY, INC.**



Principal Place of Business

15900 SW 408TH ST  
FLORIDA CITY FL 33034

Mailing Address

15900 SW 408TH ST  
FLORIDA CITY FL 33034

3. Date Incorporated or Qualified

03/25/1969

3a. Date of Last Report

04/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

Country

25

29 Zip

Country

30

4. FEI Number

59-1274059

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TORCISE, STEVE**  
15900 S.W. 408TH ST.  
P.O. BOX 3004  
FLORIDA CITY FL 33034

81 Name

82 Street Address (P.O. Box Numbers Not Accepted)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent

Typed Registered Agent signature (applicable to nonresident)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME **C TORCISE, STEVE SR.**  
STREET ADDRESS **17900 SW 288TH STREET**  
CITY-ST-ZIP **HOMESTEAD FL**

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE  DELETE  
NAME **VC TORCISE, SAM**  
STREET ADDRESS **17960 SW 288TH STREET**  
CITY-ST-ZIP **HOMESTEAD FL**

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE  DELETE  
NAME **P TORCISE, STEVE JR.**  
STREET ADDRESS **6800 SW 101ST STREET**  
CITY-ST-ZIP **MIAMI FL**

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE  DELETE  
NAME **STD TORCISE, RICK**  
STREET ADDRESS **18000 SW 288TH STREET**  
CITY-ST-ZIP **HOMESTEAD FL**

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Steve Torcise, Sr.*  
**Steve Torcise, Sr.**

5/17/96 (305) 247-3011

CR2E034 (12/95)