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 # 354458

SHERROD CONSTRUCTION COMPANY, INC.]			
		•						
Bringing Place	on of Buriage	Mailing Addross			<u> </u>		i kath tigh bagh t	
Principal Place of Business Mailing Address								
2001 SW 100 TERRACE 2001 SW 100 TERRACE MIRAMAR FL 33025 MIRAMAR FL 33025					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qua			
	•				10/28/1969			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Ар	plied For
21		26			59-1273547	•	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desir	ed 🗆	\$8.75	Additional
22	<u> </u>	27	·		or Controlle or Glatas Bean	<u>, , , , , , , , , , , , , , , , , , , </u>	Fee Re	quired
City & State City & State		— ´	\		6. Election Campaign Financing		\$5.00 May Be	
23 28 28			Zip Country		Trust Fund Contribution		Added to Fees	
Zip			30		This corporation owes the current year in Personal Property Tax.		ntangible □ Yes □ No	
24	9. Name and Address of Current Registered Agent		30		10. Name and Address of New Registere			
	Thaire did Addiese of Carre	it registered rigorit	8.	1 Name	TO. Hamb and Manage Of It	cw riegiotere	a rigoni	
SHERROD, JOAN								
14750 SW 31ST CT			82	2 Street Add	Iress (P.O. Box Number is Not Ad	ceptable)		
FT LAUDERDALE, FL			83	3				100
DAVI	IE FL 33331			1 20				
			84	4 City		F	L 85 Zip C	Code
11., Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abov	ve-named corp	poration submits this statement fo	r the purpose	of changing its	registered
office or r	registered agent, or both, in the State im familiar with, and accept the obligi	e of Florida. Such change was a ations of, Section 607.0505, Flo	authorized by orida Statute	y the corporati s.	ion's board of directors. I hereby a	accept the app	ointment as reg	gistered
SIGNATURE					2			
Signature, typed or printed name of registered agent and title if applicable. (NOTE:				ent signature requin	ed when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO) OFFICERS A		
TITLE	PD CALEBOOD TOWN	☐ DELETE	1.1 TITLE	1		•	☐ Change	☐ Addition
NAME	SHERROD, JOAN		1.2 NAME	1				
STREET ADDRESS	2001 SW 100 TERRACE			T ADORESS				
CITY-ST-ZIP TITLE	MIRAMAR FL.	☐ DELETE	1.4 CITY-1 2.1 TITLE				☐ Change	Addition
	SHERROD, CURTIS		2.1 MAME				⊘nange	L Addition
NAME	****			ET ADDRESS				
STREET ADDRESS	MIRAMAR FL	•	2.4 CITY-	ł				
CITY-ST-ZIP TITLE	TD	☐ DELETE	3.1 TITLE	31-ZIF		**	Change	Addition
NAME	SHERROD, JOAN	. –	3.2 NAME					
STREET ADDRESS	2001 S.W. 100 TERRACE	•	3.3 STREE	ET ADDRESS	,			
CITY-ST-ZIP	MIRAMAR FL		3.4. C/TY-					
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAME	:				
STREET ADDRESS		•	4.3 STREE	ET ADDRESS				
CITY-ST-ZIP			4.4 CITY - 5	ST-ZIP				
TTLE		☐ DELETE	5.1 TITLE			•	☐ Change	☐ Addition
NAME			5.2 NAME		÷ *			
STREET ADDRESS			5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY-5		· ·	·		
πιε	A TOTAL TO A STATE OF	☐ DELETE	6.1 TITLE				☐ Change	☐ Addition
NAME	l stituti Nacionalista		6.2 NAME					
STREET ADDRESS	- *		6.3 STREE	TADDRESS				

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

CITY-ST-ZIP

FILED

Jan 22, 1999 8:00am

Secretary of State 01-22-1999 90049 018 ***150.00

CR2E034 (11/98)