

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 11, 2008 8:00 am**  
**Secretary of State**

08-11-2008 90122 011 \*\*\*150.00



**DOCUMENT # 385234**

1. Entity Name

VARIETY CONSTRUCTION CO.

Principal Place of Business

817 A E 9 ST.  
 DEERFIELD BEACH FL 33441  
 US

Mailing Address

PO BOX 1091  
 DEERFIELD BEACH FL 33443-1091  
 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

817 S.E. 9 ST.

Suite, Apt. #, etc.

2nd MOORE

CR2E034 (4/08)

City & State

City & State

4. FEI Number

59-1414927

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON, MICHAEL R  
 817 S.E. 9 ST  
 P.O. BOX 1091  
 DEERFIELD BEACH FL 33443-1091

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**DUE BY September 3, 2008**  
**Make Check Payable to Florida Department of State**

S. 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	ANDERSON, MICHAEL	
STREET ADDRESS	P.O. BOX 1091-817 SE 9 ST	
CITY-ST-ZIP	DEERFIELD BEACH FL 33443-1091	
TITLE	PDT	<input type="checkbox"/> Delete
NAME	ANDERSON, MICHAEL R	
STREET ADDRESS	PO BOX 1091	
CITY-ST-ZIP	DEERFIELD BEACH FL 33443-1091	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Michael Anderson* MICHAEL R. ANDERSON 954-663-7368  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 8/11/08 Day/Time/Phone #

ATTACHMENT

40113190

#385234

**VARIETY CONSTRUCTION CO.**

**Michael R. Anderson, President**

General Contractor Lic. CG-CA25698

8-4-08

Division of Corporations  
Annual Reports Section  
P.O. Box 6850

Gentlemen:

We sent in the card to receive a form for our annual report by mail. However, we never received it.

Enclosed is the only form we received on Aug. 4, 2008 showing a \$400.00 late fee. I have filled out the form and am enclosing the fee of \$150.00 and have checked the box that we did not receive the form. Please waive the late fee.

Thank you very much,



Eve Smith bookkeeper for  
Michael Anderson, Pres.

P.O. BOX 1091  
DEERFIELD BEACH, FL 33443-1091  
CELL: (954) 829-1655 FAX: (561) 367-7856