

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 4:12

DOCUMENT # 416605 (4)
1. Corporation Name
G. MITCHELL CONSTRUCTION CORP.

Principal Place of Business Mailing Address
**8920 SW 20TH PLACE APT A
FT LAUDERDALE FL 33324** **1502 WHITE HALL DRIVE
404
FT. LAUDERDALE FL 33324**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 **1502 WHITE HALL DR** 26
State **FL** State, Apt. #, etc.
22 **404** 27
City & State **FT. LAUD** City & State
23 28
Zip **33324** Country **BROWARD** Zip Country

3. Date Incorporated or Qualified 3a. Date of Last Report
01/16/1973 **06/07/1994**

4. FEI Number Applied For
59-1432458 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**ISGAN, GERALDINE R
8920 SW 20TH PLACE APT A
FT. LAUDERDALE FL 33324** **1502 WHITE HALL DR
#404**

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE: *Geraldine R. Isgan* REGISTERED AGENT (PLEASE PRINT NAME AND TITLE)
Geraldine R. Isgan Registered Agent (please print name and title)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|--|--|---------------------|
| 12.1 NAME P ISGAN, GERALDINE R. | 12.2 STREET ADDRESS 8920 SW 20TH PLACE APT A FT. LAUDERDALE FL 33324 | 11.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | 11.2 NAME |
| 12.3 CITY, ST, ZIP | 12.4 CITY, ST, ZIP | 13.1 STREET ADDRESS 1502 WHITE HALL DR #404 | 13.2 CITY, ST, ZIP |
| 12.5 NAME | 12.6 STREET ADDRESS | 13.3 CITY, ST, ZIP | 13.4 CITY, ST, ZIP |
| 12.7 NAME | 12.8 STREET ADDRESS | 13.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | 13.6 NAME |
| 12.9 NAME | 12.10 STREET ADDRESS | 13.7 STREET ADDRESS | 13.8 CITY, ST, ZIP |
| 12.11 NAME | 12.12 STREET ADDRESS | 13.9 CITY, ST, ZIP | 13.10 CITY, ST, ZIP |
| 12.13 NAME | 12.14 STREET ADDRESS | 13.11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | 13.12 NAME |
| 12.15 NAME | 12.16 STREET ADDRESS | 13.13 STREET ADDRESS | 13.14 CITY, ST, ZIP |
| 12.17 NAME | 12.18 STREET ADDRESS | 13.15 CITY, ST, ZIP | 13.16 CITY, ST, ZIP |
| 12.19 NAME | 12.20 STREET ADDRESS | 13.17 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition | 13.18 NAME |
| 12.21 NAME | 12.22 STREET ADDRESS | 13.19 STREET ADDRESS | 13.20 CITY, ST, ZIP |

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law from 199.07(9)(k), Florida Statutes. I further certify that the information included on this annual report or biannual annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Geraldine R. Isgan* 1-11-95 306-475-0318
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number
GERALDINE R ISGAN