FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 452268

(6)

WILCO CONSTRUCTION CO. OF FLORIDA

Principal Place of Business Mailing Address 126 S. FEDERAL HWY, STE 210 DANIA FL 33004 DANIA FL 33004 DANIA FL 33004									
						3. Date Incorporated or Qualified 07/10/1974		te of Last F	Report
2. Principa Pl	lace of Business	2a. Mailing Address			4. FEI Number 59-1546845		I	pplied For	
Suite, Apt	#. etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional Required
City & State	(3)	City & State			6. Election Campaign Financing			May Be	
23	Y	28				Trust Fund Contribution		Added	to Fees
Z(p 24]	Country 25	Z (p	Gour 30	ntry		8. This corporation has liability fo Florida Statutes	r intangible Yes		s. 199.032,
•••	9. Name and Address of Curren	1				10. Name and Address of New R	<u> </u>		
	SH, DAVID W			81	Name				
	SW 32 ST AUDERDALE, FLORIDA		-	82	Street Addre	ess (P.O. Box Number is Not Accepta	ible)		
3331	• • •		-	83					
			-	84	City			85 Zip	Code
44 D	to the provisions of Sections 607.050; egistered agent, or both, in the State	2 and CO7 1509 Florido Ctab	too the ob		named sorn	oration as baile this statement for the	FL.	Abanaina	ita ragiotarad
SIGNATURE	Thinitian with, and accept the obligation is the species pented to be of organized age. OFFICERS AND	oracid title if applicable (NC		Age		ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTO	
NAME	FLESH, DAVID W		1.2 NA	ME					
STREET ADDRESS	1313 SW 32ND ST		1.3 ST	REET	ADDRESS				
0/17 - \$1 - 7/P	FT LAUDERDALE, FL 00000 SD	DELETE	1.4 CIT 2.1 TII		T-ZIP			Change	Addition
NAME	FLESH, MARTINA	בן אננוני	2.3 NA					Vilange	L. Rudillon
STREET ADDRESS	1313 SW 32ND ST				ADDRESS				
CIFY ST-ZIP	FT LAUDERDALE, FL 00000		2 4 0						
TOLE	V CLEAN DAIR W	DELETE	3 1 TIT	LE				☐ Change	Addition
MAMi	FLESH, PAUL W. 765 NW 103 TERR UNIT 104		3 2 NA						
STREET ACCORESS	PEMBROKE PINES FL				ADDRESS				
COY-ST ZIP TITEF		☐ DELETE	3.4. CI 4.1 TIT		SI-ZIP	***************************************		Change	Addition
NAME			4. 2 N/						
STREET AFORESS	\$10	M	4.3 ST	REET	ADDRESS				
CHY \$1-70	H E		4.4 CIT	TY-S	T-ZIP				
TIME		DELETE	5.1 TIT					L Change	Addition
NAME			5.2 NA						
SUBSELLATIONESS					ADDRESS				
LODY-ST ZIE TOLE		DELETE	5.4 CIT 6.1 TIT		1- ZIF			Change	Addition
NAME			6.2 NA						
STREET A ADORESS					ADDRESS				
\$11Y+\$1_20	· · · · · · · · · · · · · · · · · · ·		6.4 CIT						
14. I do herel	by certily that the information supplied	t with this filing does not qua	alify for the	exe	mption stated	in Section 119.07(3)(i), Florida Statumy signature shall have the same led	tes. I further	certify tha	it the
Lam an o appears i	efund pated on this annual report or s diper or director of the corporation or in Block 12 or Block 18 if changed) or	the receives of trustee emoc on an ottachmen with an	wered to e	xec	cute this report	t as required by Chapter 607, Florida	Statutes; a	nd that my	name

SIGNATURE:

TUBE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

), Flesh 4-9-9

(954)923-8380

FILED

Apr 15 1997 8:00am

Secretary of State