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 # 496849 1. Corporation Name

T & L BUILDERS, INC.

FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90184 013 ***150.00



Principal Place of Business Mailing Address						
1600 SW 83RD AVENUE 1600 SW 83RD AVE						
FT. LAUDERDA	LE FL 33328	FT. LAUDERDALE FL 33324 US	FT. LAUDERDALE FL 33324			DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualifed
						02/18/1976
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-1655444 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat				_		6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible
24	25	29 3	30			Personal Property Tax. Yes No
	9. Name and Address of Currer	t Registered Agent				10. Name and Address of New Registered Agent
1405	NA. TILOBAAO A			81	Name	
MORIN, THOMAS A				82	Street Addre	ess (P.O. Box Number is Not Acceptable)
	00 SW 57TH PL.					
FI. I	LAUDERDALE FL 33328			83		
				84	City	85 Zip Code
	. <u></u> <u></u>			$oxed{oxed}$		pration submits this statement for the purpose of changing its registered
agent. i a SIGNATURE	m familiar with, and accept the obligation of th				signature required	when reinstating) DATE
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 11	ΓLE		☐ Change ☐ Addition
NAME	MORIN, THOMAS A		1 2 NA	ME		
STREET ADDRESS	10700 SW 57TH PL		1.3 STREE		ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		1.4 CITY-ST-ZIP		-ZiP	
TITLE		☐ DELETE	2.1 TITLE		1	☐ Change ☐ Addition
NAME			2.2 NA	WE		
STREET ADDRESS			2.3 STREE		ADDRESS	
CITY-ST-ZIP			2.4 C	2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE			. Change Addition
NAME			3.2 NA	ME		
STREET ADORESS			3.3 ST	REET	ADDRESS	
CITY-ST-ZIP			_	ITY-ST	r-ZIP	
TITLE		☐ DELETE	4.1 TI	TLE		☐ Change ☐ Addition ☐
NAME			4. 2 N	AME		
STREET ADDRESS			4.3 ST	REET.	ADDRESS	
CITY-ST-ZIP				TY-ST	-2IP	Change C Addition
TITLE		☐ DELETE	5,1 TF			☐ Change ☐ Addition
NAME			5.2 N		ADDOESS	
STREET ADDRESS	[•		ADDRESS	
CITY-ST-ZIP		Finere	5.4 CI	TY-ST	-417	☐ Change ☐ Addition
TITLE]	☐ DELETE	6.2 N/			Change C Addison }
NAME					ADDRESS	
STREET ADDRESS				TY-ST	ADDRESS	

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 the adactment with an address, with all other like empowered.

SIGNATURE:

OFFICER OR DIRECTOR