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

PROFIT CORPORATION ANNUAL REPORT

1999



Mailing Address

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 548675

Corporation Name

Principal Place of Business

MIZNER ESTATES CONSTRUCTION, INC.

48 EAST ROYAL		48 EAST ROYAL PALM HOAD BOCA RATON FL 33432					
BOOK HATON	C OUTOE	טטטון אוויטון דב טטיטב			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 10/06/1977		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21		26			59-1787948	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired	\$8.75 A	Additional
22		27			5. Certificate of Status Desired	Fee Re	quired
City & State	•	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year In	tangible	
24	25 29 30			Personal Property Tax. Yes No			
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered	Agent	
DOB!	NICON MODDIC		81	Name			
-	INSON, MORRIS			Street Address (P.O. Box Number is Not Acceptable)			
	AST ROYAL PALM ROAD						
BOC	A RATON FL 33432		83				
			84	City		85 Zip C	Code
				,	FL	_ `	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida. Such change was aut	nonzed by	the corpor	corporation submits this statement for the purpose o ration's board of directors. I hereby accept the appo	i changing its intment as reg	registered gistered
SIGNATURE					quired when reinstating) DATE		
12.	Signature, typed or printed name of registered a	AND DIRECTORS	13.	t signature rec	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PSD	DELETE	1.1 TITLE	-	7.001110110111111000 10 01 10 01	Change	Addition
NAME	ROBINSON, MORRIS		1.2 NAME				
			1.3 STREE	ADDRESS			
STREET ADDRESS	BOOK BATON SI		1.4 CITY-S				
CITY-ST-ZIP			2.1 TITLE	1-21		[] Change	Addition
			2.2 NAME			,	
NAME	40 F DOVAL DALM DACD		2.3 STREE	LYDDBESS			
STREET ADDRESS	BOCA RATON FL		1	ſ			İ
CITY-ST-ZIP			2. 4 CITY-5	-1-ZIP		Change	Addition
TITLE	<u> </u>		3.2 NAME			_, •	_
NAME	40 E BOYAL BALLA BD		3.3 STREE	ADDRESS			
STREET ADDRESS	BOCA RATON FL		3.4. CITY-5				
CITY-ST-ZIP	V	☐ DELETE	4.1 TITLE	11-211		[] Change	Addition
TITLE	BRAMNICK, HINDA		4, 2 NAME				_
NAME	48 E ROYAL PALM RD			ADDRESS			
STREET ADDRESS	BOCA RATON FL						
CITY-ST-ZIP	AS	☐ DELETE	4.4 CITY-S 5.1 TITLE	1-ZIP		[] Change	Addition
TITLE	ROBINSON, CHARLOTTE		5.2 NAME				
NAME	48 E ROYAL PALM RD		5.3 STREE	TADDRESS			
STREET ADORESS	BOCA RATON FL		5.4 CITY-S				
CITY-ST-ZIP	BOOM RATON FL	☐ DELETE	6.1 TITLE	1-2F		[] Change	Addition
TITLE :			6.2 NAME				
NAME				ADDRESS			
STORET ADDRESS			= 0.0 0 INDE				

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Morris Common Resident

CITY-ST-ZIP

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 emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or one attachment with an address, with all other like empowered.

4/29/99

561-368-1852

Daytime Phone #

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90179 030 ***150.00

CD2E03/ /11/0