

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 571160

Entity Name
SOUTHERN GROUTS & MORTARS, INC.



Principal Place of Business
**1502 S.W. 2ND PLACE
POMPANO BEACH, FL 33069-3220**

Mailing Address
**1502 S.W. 2ND PLACE
POMPANO BEACH, FL 33069-3220**



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1821674

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PICOU, RONNIE I.
1500 S.W. 2ND PLACE
POMPANO BEACH, FL**

**DO NOT WRITE
IN THIS SPACE**

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

RONNIE I. PICOU
(NOTE: Registered Agent signature required when re-registering)

1-16-06
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

**1000000397887
01/30/06-80074-001 150.00**

OFFICERS AND DIRECTORS

NAME	PD
NAME	PICOU, RONNIE I
STREET ADDRESS	197 ROYAL PALM DR
CITY-ST-ZIP	FT LAUDERDALE, FL 0.
NAME	EVP
NAME	MCKEE, ELIZABETH PICO
STREET ADDRESS	914 CYPRESS DRIVE
CITY-ST-ZIP	DELRAY BEACH, FL
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
NAME	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONNIE I. PICOU 1-16-06

Date

Daytime Phone #