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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28, 1999 8:00am

Secretary of State

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

				→ 01-28-1999 90040 022 ***15	50.00
DOCU 1. Corporation	MENT # 584804				
DOUBLE	E G PAVING COMPANY				
Principal Plac	ce of Business	Mailing Address		T imprest Driver (destrement) tents entry order exibit o	BIBNI BIBNI BIBNI BIBNI BIBNI 1901
6501 NW 53 S		6501 NW 53 ST	•		
LAUDERHILL F US	-L 33319	LAUDERHILL FL 33319 US		DO NOT WRITE IN THIS	SPACE
		50		3. Date Incorporated or Qualifed	
· ·		<u> </u>		09/15/1978	<u> </u>
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt.	# etc	Suite, Apt. #, etc.		59-1905353	Not Applicable \$8.75 Additional
22	. #1 CIU.	27	•	5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State	 _	6. Election Campaign Financing	\$5.00 May Be
23	·	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zîp ·	Country	8. This corporation owes the current year Int	
24	9. Name and Address of Current		30	Personal Property Tax. 10. Name and Address of New Registered	Yes No
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	registerou Agent	81 Name	TO. Hallo sita Adaress of New Adgistered	Agent
GRII	FFIN, LON	,	82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	1 NW 53 ST	•	Street Addre		ار المعاولات و المارية عروا المارية ا
LAU	IDERHILL FL 33319		83		
			84 City	7 1 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2	85 Zip Code
44 Directions	to the provisions of Sections 607 0502	and 607 1509 Florido Statute	the should named corns	FL	abanaina ita sasiatarad
office or i	registered agent, or both, in the State of	f Florida. Such change was at	thorized by the corporation	pration submits this statement for the purpose of n's board of directors. I hereby accept the appoint	ntment as registered
agent. La	am familiar with, and accept the obligation	f Florida. Such change was au ons of, Section 607.0505, Flor	athorized by the corporation ida Statutes.	oration submits this statement for the purpose of in's board of directors. I hereby accept the appoi	ntment as registered
office or agent. I a	am familiar with, and accept the obligation	ons of, Section 607.0505, Flor	thorized by the corporation in a Statutes. Registered Agent signature required		ntment as registered
agent. La SIGNATURE 12.	am familiar with, and accept the obligation Signature, typed or printed name of registered agent OFFICERS AND	ons of, Section 607.0505, Flor and title if applicable. (NOTE: DIRECTORS	ida Statutes. Registered Agent signature required 13.		ID DIRECTORS IN 12
agent. La SIGNATURE 12. TITLE	strong familiar with, and accept the obligation in the control of	ons of, Section 607.0505, Florend title if applicable. (NOTE:	Registered Agent signature required 13. 1.1 TITLE	when reinstating) , , ; , DATE	<u> </u>
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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 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

CITY-ST-ZIP

959)749-938-Daytime Phone # CR2E034 (11/98)