**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

APPROVED AND FILED

95 MAY 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
**1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **597037** **(1)**

1. Corporate Name
**ABC CUTTING CONTRACTORS, INC.**

Principal Place of Business
**2001 ANDREWS AVENUE**
**POMPANO BEACH FL 33069**

Mailing Address
**2001 ANDREWS AVENUE**
**POMPANO BEACH FL 33069**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/12/1978**
3a. Date of Last Report: **03/16/1994**

2. Principal Place of Business
21
Suite Apt. #, etc.
22
City & State
23

2a. Mailing Address
26
Suite Apt. #, etc.
27
City & State
28

4. FEI Number: **59-1521513** ☐ Applied For ☐ Not Applicable

5. Certificate of Status (desired) ☐ **$8.75** Additional Fee Required

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

24 25 29 30

8. This corporation has authority to own real property in Florida Statute. X Yes. ☐ No.

9. Name and Address of Current Registered Agent

**BULLY, BRAD**
**BERVARD FINACIAL CENTRE SUITE 1460**
**500 E. BROWARD BLVD.**
**FT LAUDERDALE FL 33394**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.1908, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE(S)

12. OFFICER AND DIRECTORS

PD
MCCOY, LARRY W.
2001 ANDREWS AVENUE
POMPANO BEACH FL

ST
MCCOY, FAITH
2001 ANDREWS AVENUE
POMPANO BEACH FL

V
MCCOY, TERRY
2001 ANDREWS AVENUE
POMPANO BEACH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I/We 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 I/we, name appears in Block 11 or Block 12 of changed, or on an attachment with an address.

**SIGNATURE:** 5.15.95 305-523-4848

SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0113313 CP