## 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

## Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90036 020 \*\*\*150.00

DOCUMENT	#	61	4466
1. Corporation Name		<b>O</b> 1	

CONSTRUMAT INC.

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Principal Place	e of Business	Mailing Address		T (MAIST DEFAN II NE NEWS MIDIN DEEL BEREIN BINN		itt ater iaai
Principal Place of Business Mailing Address  1611 SOUTHWEST 32ND AVENUE 1611 SOUTHWEST 32ND AVENUE MIAMI FL 33145-1829 MIAMI FL 33145-1829		/ENUE	DO NOT WRITE IN TH	IS SPACE		
				3. Date Incorporated or Qualifed		
				04/05/1979		į
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	App	olied For
21		26		59-2620647	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Red	
City & State	9	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28		Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	8. This corporation owes the current year I	Intangible	
24	25	29	30	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registere	d Agent	
			81 Name			
	AAMIL, ANTHONY I SW 32 AVE		82 Street A	ddress (P.O. Box Number is Not Acceptable)		
MIAN	MI FL 33145		83			
					. 85 Zip C	
			84 City	· F	L  85   Zip C	,oue
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblight  A H O Y  Signature, typed or printed name of registered agents.	e of Florida. Such change was au lations of, Section 607.0505, Flor	ithorized by the corpor	orporation submits his statement for the purpose ation's poard of directors. I hereby accept the app	2) 19	gistered .
		jent and title it applicable (NOTE.	Leaning was an entire rec	quired when joinstaurig)		
12.	<u> </u>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
12.	<u> </u>			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
l	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	OFFICERS A	ND DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME	OFFICERS A PD VILLAANIL, ANTHONY	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE  NAME  STREET ADDRESS	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAM! FL 33145	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H	ND DIRECTORS  DELETE  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H 1611 SW 32 AVE	ND DIRECTORS	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H 1611 SW 32 AVE	ND DIRECTORS  DELETE  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	☐ Change	Addition Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H 1611 SW 32 AVE	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.5 TITLE  5.7 NAME  5.8 STREET ADDRESS  5.8 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H 1611 SW 32 AVE	DELETE  DELETE  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD VILLAANIL, ANTHONY 1611 SW 32 AVE MIAMI FL 33145 DS VILLAAMIL, GLORIA H 1611 SW 32 AVE	DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.5 TITLE  5.7 NAME  5.8 STREET ADDRESS  5.8 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Change ☐ Change ☐ Change	Addition  Addition  Addition  Addition

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 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.