

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortimer

Secretary of State

DIVISION OF CORPORATIONS

1996-1-96

13-61716

XC

DOCUMENT # 643422

(9)

1. Corporation Name

P.M. CONTRACTORS, INC.



Principal Place of Business

890 N. FEDERAL HIGHWAY APT 104
LATANA FL 33462
US

Mailing Address

P.O. BOX 3001
LATANA FL 33465
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

10/30/1979

3a. Date of Last Report

04/25/1995

4. FEI Number

59-1953962

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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

FLECK, WILLIAM A. ESQ
1530 NO FEDERAL HIGHWAY
LAKE WORTH FL 33460

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this 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.

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12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
PUOLIMATKA, RAUNO
896 N. FEDERAL HWY.
LATANA FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
DIANA F. JACKSON
896 N. FEDERAL HWY # 125
LATANA FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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NAME

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STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

☐ Change ☐ Addition

2. TITLE

3. NAME

4. STREET ADDRESS

5. CITY - ST - ZIP

☐ Change ☐ Addition

3. TITLE

4. NAME

5. STREET ADDRESS

6. CITY - ST - ZIP

☐ Change ☐ Addition

4. TITLE

5. NAME

6. STREET ADDRESS

7. CITY - ST - ZIP

☐ Change ☐ Addition

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

☐ Change ☐ Addition

6. TITLE

7. NAME

8. STREET ADDRESS

9. CITY - ST - ZIP

☐ Change ☐ Addition

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96

407582-0647

0291343 CP

CR2E034 (12/95)