Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90044 043 \*\*\*150.00

n emplem metre denna eterr denna lenne etal dener dener dener dente dente delle delle delle

## 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

## DOCUMENT # 643422

1. Corporation Name

P.M. CONTRACTORS, INC.

-										
Principal Place of Business Mailing Address							r toditio attet attet till atala (lata (lata atali	#11 <b>[[1]</b>	41411 (1)	#11 <b>#1</b> #11 <b>  188</b>
890 N. FEDERAL HIGHWAY APT +0+ 3; 2. P.O. BOX 3001										
LATANA FL 33462 LANTANA FL 33465 US US							DO NOT WRITE IN THIS SP			
. 00							3. Date Incorporated or Qualifed			
	•						10/30/1979			
2. Principal Place of Business 2a. Mailing Address										lied For
26							59-1953962	T	Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Addition			
22			•• . •		*	5. Certificate of Status Desired Fee Required				
City & State . City & State			& State				6. Election Campaign Financing \$5.00 May Be			
23		28	_				Trust Fund Contribution	A	ded to	Fees
Zip				Country			8. This corporation owes the current year Intangible			
24	25	29		30			Personal Property Tax.	☐ Ye	s l	No
	9. Name and Address of Curre	nt Registered	I Agent				10. Name and Address of New Registered	Agent		
F1 F2	CV 1481111434 A FCO				81	Name				
FLECK, WILLIAM A. ESQ						Street Addr	ress (P.O. Box Number is Not Acceptable)			
1530 NO FEDERAL HIGHWAY										
LAK	E WORTH FL 33460				83					
					84	City		85	Zip C	ode
					~	Oily	FL	"	_, .	
SIGNATURE	Signature, typed or printed name of registered ag OFFICERS A	ent and title if applic ND DIRECTO	RS	E: Registered	Agent	t signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	P		☐ DELETE	1.1 TE	LE			ㅁ아	ange	Addition
NAME	PUOLIMATKA, RAUNO			1.2 N	ME		•			
STREET ADDRESS	1			1.3 ST	REET	ADDRESS	•			
CITY-ST-ZIP	LANTANA FL			1.4 CI		-ZIP				CT Addition
TITLE	§ □ DELETE		2.1 Π	LΕ			□ Ct	ange	Addition	
NAME	DIANA F. JACKSON			2.2 N	ME		•			
STREET ADDRESS	l .	•		2.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	LATANA FL			2.4 C	TY-5	T-ZIP				
TITLE			☐ DELETE	3.1 Π	ΠÆ			□ Ct	ange	Addition
NAME				3.2 N	ME					
STREET ADDRESS				3.3 \$1	REET	ADDRESS				
CITY-ST-ZIP				3.4. C	_	T-ZIP				
TITLE			DELETE	4.1 TT	ΠE				ange	Addition
NAME				: 4. 2 N						
STREET ADDRESS	· ·			4.3 \$1	REET	ADORESS				
CITY-ST-ZIP	<u> </u>		-	4.4 CI		r-ZIP				
TITLE	_		☐ DELETE	5.1 TT				□ CI	ange	Addition
NAME	:			5.2 N						
STREET ADORESS					REET	ADDRESS				
CITY-ST-ZIP				E # 4 CI						
TITLE					TY-ST	r-ZIP				7300
HILL			DELETE	6.1 TF	πE	r-ZIP		□ CI	ange	Addition

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP