

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 7:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

700001481117  
-05/09/95--01103--014  
\*\*\*\*200.00 \*\*\*\*200.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # F20141 (0)

1. Corporation Name:

~~HOMESTEAD CONCRETE AND DRYWALL INCORPORATED~~

Homestead Concrete & Drainage, Inc.

Principal Place of Business

209 S.W. 4TH AVE.  
P.O. BOX 1273  
HOMESTEAD FL 33090

Mailing Address

209 S.W. 4TH AVE.  
P.O. BOX 1273  
HOMESTEAD FL 33090

3. Date Incorporated or Qualified  
02/18/1981

3a. Date of Last Report  
05/19/1994

4. FEI Number  
59-2069390

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

6. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. # etc.

22

City & State

23

Zip

County

24

2a. Mailing Address

26

Suite, Apt. # etc.

27

City & State

28

Zip

County

29

30

9. Name and Address of Current Registered Agent

CORDERO, ALFREDO  
29320 SW 205 AVE  
HOMESTEAD FL 33030

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 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.

SIGNATURE

Alfredo Cordero

4/25/95

Signature, Title or Printed Name of Registered Agent and the Applicant

NOTE: Registered Agent signature required when registering.

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

DP

CORDERO, ALFREDO

29230 SOUTHWEST 205 AVENUE

HOMESTEAD FL

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D

APOLINARIO, MANUEL

327 S.W. 3 STREET

FLORIDA CITY FL

13. TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:

Alfredo Cordero

4/25/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Plate #