

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F27718**

(8)

1. Corporation Name

APOLLO II STEEL ERECTION, INC.



Principal Place of Business

**7623 N.W. 74TH TERRACE
TAMARAC FL 33321**

Mailing Address

**7623 N.W. 74TH TERRACE
TAMARAC FL 33321**

2. Principal Place of Business

21 **7661 NW 74th Ave**
City, State, Zip

2a. Mailing Address

26 **7661 NW 74th Ave**
City, State, Zip

22. City & State

23 **Tamarac FL**

27. City & State

28 **Tamarac FL**

24 **33321**

25 **Broward**

29 **33321**

30 **Broward**

9. Name and Address of Current Registered Agent

**STONE, ROBERT C.
4330 SHERIDAN ST
STE 202 B
HOLLYWOOD FL 33021**

3. Date Incorporated or Qualified

04/01/1981

3a. Date of Last Report

01/26/1995

4. FEI Number

59-2080773

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. 190.032
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

11. Pursuant to the provisions of Sections 607.0107 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 607.0105, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

V
NAME **BIRS, RICHARD**
STREET ADDRESS **7623 NW 74TH TERR**
CITY, STATE, ZIP **TAMARAC FL**

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

NAME
STREET ADDRESS
CITY, STATE, ZIP

☐ DELETE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Birs

U/P

1-19-96

305-722-7210

CR2E034 (12/95)