

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F95000003053 (4)**

1. Corporation Name

BRIAN SMITH CONSTRUCTION INSPECTION, INC.



Principal Place of Business

Mailing Address

**4367 GRADUATE CIR.
HOUSTON TX 77004**

**4367 GRADUATE CIR.
HOUSTON TX 77004**

3. Date Incorporated or Qualified

06/23/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

2e Suite, Apt. #, etc

22 **1802 Calumet**

27 **1802 Calumet**

City & State

City & State

23 **Houston, TX.**

28 **Houston, TX.**

Zip

Country

Zip

Country

24 **77004-7212**

25 **U.S.A.**

29 **77004-7212**

30 **U.S.A.**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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

Signature typed or printed next to registered agent and then applicable

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**DCP
SMITH, BRIAN G
4367 GRADUATE CIR.
HOUSTON TX 77004**

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
SMITH, ELIZABETH S
4367 GRADUATE CIR.
HOUSTON TX 77004**

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**D
SCOTT, DELORES G
5218 STUYVESANT LN.
HOUSTON TX 77021**

☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP
☐ Change ☐ Addition

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)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement thereto was made under oath, that I am an officer or director of the corporation or the registered agent, and that my name appears in Block 12 or Block 13 if changed, or on an attachment thereto.

SIGNATURE

Delores G. Scott
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR AGENT

6/18/96

**(718)
529-4949**
Daytime Phone #

CR2E034 (3/96)