*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

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90027 012 ***150.00

) I KERUKKI **1910 S**ekil Teru **1910** Sekil bikil biki 1910 Bibil Bibil 1910 Bibil Bibil Bibil Bibil Bibil Bibil

	OCL	JMEN	T#	GAS	2052
4				\sim	JUVE

1. Corporation Name

CITRUS CONSTRUCTION CORPORATION

ļ			_							_	
Principal Place	of Business	Mailing Address		من بيد					÷, —; ÷ — , 187	æ-	
225 ARAGON A		27501 SO. DIXIE HIGHWAY									
CORAL GABLES	S FL 33134	300				DO NOT WRITE IN THIS SPACE					
NARANJA FL 33032 US						3. Date Incorporated or Qualifed					
, 03						09/29/1983					
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For				
⊢ '	lace of Businessa	26 Yearing Address				59-2326004	-	Not Applicable			
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.	75 Add	• • • • • • • • • • • • • • • • • • • •	l	
22	, , , , , , , , , , , , , , , , , , , ,	<u>├</u>	27			5. Certifcate of Status Desired	,	e Requ			
City & State		City & State				6. Election Campaign Financing	\$5.	.00 ма	av Be		
23		28				Trust Fund Contribution Added to Fees					
Zip	Zip	ip . Country			8. This corporation owes the current year Intangible						
24	25 29 30			Personal Property Tax.			☐ Yes No				
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regis	tered Agent				
555	NATA N. 14450 A			81	Name						
BRENNAN, III, JAMES A				82	Street Addre	ess (P.O. Box Number is Not Acceptable)				1	
	1 SO. DIXIE HIGHWAY			Ш							
	E 300			83							
, NAR	Anja Fl:33032			84	City		85	Zip Coo	de	1	
	•				•		F1_				
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the a	bove	-named corpo	pration submits this statement for the purpon's board of directors. Thereby accept the	ose of changin	g its reg	gistered tered	ـ تـنـا	
oπice or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Flo	rida Stat	utes.	uie corporation	ins board of directors. Thereby accept the	арролилент	as rogis	ioroa		
]		,								ļ	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE											
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE				1 5	
TITLE	DPST	☐ DELETE	1.1 T				☐ Cha	inge	Addition	1	
NAME	Districtivity of winds 7 mg		AME						3		
STREET ADDRESS	27501 SO.DIXIE HWY, #300		1.3 STREET ADDRESS		ADDRESS					Ì	
CiTY-ST-ZIP	NARANJA FL 33032			ITY-ST	r-zip				☐ Addition	۶	
TITLE !		☐ DELETE	2.1 T				☐ Cha	iiige		`	
NAME		2.3		2.2 NAME			r		'	ĺ	
STREET ADDRESS			i		ADDRESS		•				
CITY-ST-ZiP	<u> </u>		2. 4 CIT		T-ZIP				☐ Addition	ł	
TITLE		☐ DELETE		3.1 TITLE 3.2 NAME		23	Cha		☐ Addition		
NAME							e i perco	•		{	
STREET ADDRESS	· — ·				ADDRESS	·				ĺ	
CITY-ST-ZIP			_	CITY-S	T- ZIP				Addition	1	
TITLE		☐ DELETE	4.1 T				Cha	ııye			
NAME	, .		1	AME						İ	
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP				ITY-ST	r-zip				Addition	1	
TITLE		~ □ DELETE - ~	5.1 Ti 5.2 N		-	راما المجالي الماليان	Cha	/	T vooinou		
NAME					ADDRESO		•				
STREET ADDRESS					ADDRESS					ĺ	
CITY-ST-ZIP ·	· · · -	□ ==: =≠=	5.4 C	ITY-ST	9-ZIP		F7 6		Addition	ĺ	
) TITLE		☐ DELETE					Cha	rige	☐ vagatou		
NAME		•	AME						[
STREET ADDRESS	· · · · · · · ·		6.3 S	IREET	ADDRESS						

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.

SIGNATURE:

OR OBSERVATIONE STANKS OF DEBRENANTA

1/26/99

3%) 246-1778

Darwime Phone #