FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 15, 1999 8:00am

Secretary of State

02-15-1999 90037 048 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H52423

E & S CONSTRUCTION INC.

E 0 3 00	Mornoonen me								
Dringing Place	of Business	Ma	iling Address					-	- 3
Principal Place of Business * EARROL SMITH			% EARROL SMITH 2369 RALEIGH STREET						
2369 RALEIGH STREET HOLLYWOOD FL 33020			HOLLYWOOD FL 33020				DO NOT WRITE IN THIS SPA	CE	
HOLLINGODIC	WW.EU						3. Date incorporated or Qualifed 04/16/1985	ķ.	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number 59-2519855		Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					8.75 Ad	
22			City & State					\$5.00 м	lay Be
City & State			28				Trust Fund Contribution	Added to	Fees
23 Zip	Country		Zip	_	untry		8. This corporation owes the current year Intangil Personal Property Tax.	ble Yes [□No
24	25	29		30	_		10. Name and Address of New Registered Age	nt	
	9. Name and Address of Current	Regis	tered Agent		81	Name			
SMITH, EARROL				82	Street Add	iress (P.O. Box Number is Not Acceptable)			
2369 RALEIGH STREET HOLLYWOOD FL 33020					83		4 1 1 2 4 4 1 2 1 2 1 2 1 2 1 2 1 2 1 2	- 111	
					84	City	F1 8	5 Zip Co	ode
	_						Le	naina its r	egistered
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 6 of Flori	607.1508, Florida Statu da. Such change was a f. Section 607.0505, Flo	tes, the authoriza orida Sta	above ed by atutes	e-named corporati	poration submits this statement for the purpose of chation's board of directors. I hereby accept the appointment		istered
agent. I ar	n familiar with, and accept the obligat	nons oi	. 1				1-21-99	· · ·	
SIGNATURE	Signature, typed or printed name of registered agen	it and title	if applicable. (NOT	E: Register	ed Age	nt signature requir	red when reinstating)		20 IN 12
12.	OFFICERS AN	D DIRE	ECTORS	13	3		ADDITIONS/CHANGES TO OFFICERS AND I	Change	Addition
TITLE	DP		☐ DELETE	1.1	TITLE	Ì	11. W. T.	, change	
NAME	SMITH, EARROL			1.2	NAME				
STREET ADDRESS	2369 RALEIGH ST			1.3	STREE	T ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020			1.4	CITY-S	ST-ZIP		Change	Addition
TITLE	DS		☐ DELETE	2.1	TITLE		<u>-</u>	1 change	
NAME	SMITH, MARGERY			2.2	NAME	ļ		•	
STREET ADDRESS	2369 RALEIGH ST			2.3	STREE	T ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020			2.	4 CITY-	ST-ZIP		Change	Addition
TITLE	V		☐ DELETE	3.1	TITLE		/ L	"] Citatige	L Addison
NAME	SMITH, RAYMOND			3.2	NAME	ļ			
STREET ADDRESS	2369 RALEIGH ST			3.3	STREE	ET ADDRESS	the second of th		
1	HOLLYWOOD FL 33020			3.4	4. CITY-	ST-ZIP		705	Addition
CITY-ST-ZIP	V		☐ DELETE	4.	TITLE			Change	- C Zuditon
1	ROLLE, CHARLOTTE			4.	2 NAME				ì
NAME STREET ADDRESS	AAAA DALEICH OT			4.	3 STREI	ET ADDRESS			Į
1	HOLLYWOOD FL 33020		4.46		4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		- Addition
CITY-ST-ZIP TITLE	1102211100011		☐ DELETE	5.1 TIT			L	Change	Addition [
				5.	2 NAME		•		
NAME				5.	3 STRE	ET ADDRESS			
STREET ADDRESS	1			5	4 CITY-	ST-ZIP			
CITY-ST-ZIP			☐ DELETE	6	1 TITLE		l	Change	☐ Addition
NAME	,			6	.2 NAME			•	
				6	.3 STRE	ET ADDRESS			
STREET ADDRESS	~ i					1			,

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 on 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP