

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # H66257

1. Entity Name
ALLEN AND DANIELS CONSTRUCTION COMPANY, INC.



Principal Place of Business
**5826 SW 23 ST.
HOLLYWOOD, FL 33023**

Mailing Address
**5826 SW 23 ST.
HOLLYWOOD, FL 33023**



04132006 No Chg-P CRZE034 (11/05)

4. FEI Number
59-2556601

Applied For
Not Applicable

6. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ALLEN, DALE L.
5826 SW 23 ST.
HOLLYWOOD, FL 33023**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00.**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**000000544179
05/11/06-80025-004 150.00**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STD
ALLEN, ROBERTA
5826 S.W. 23RD. ST.
HOLLYWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
ALLEN, DALE
5826 S.W. 23RD ST.
HOLLYWOOD, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roberta Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/06
Date

954-983-1297
Daytime Phone #