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PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

DOCUMENT # **H72449**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90038 027 ***150.00

MAGNUM	M CONSTRUCTION, INC.												
Principal Place	e of Business	Mailing Ad	ddress				11001011	8111 18818 EII 81811 B	.))(9 18() 0 1	#14 #1 4 71 # 41	#4 1 44	
C/O GARY OSS		C/O GARY											
3140 60TH STREET. SOUTHWEST 3140 60TH STREET. SOUTH				HWEST									
NAPLES FL 33999 NAPL			IAPLES FL 33999					DO NOT, WR		SPACE			
·US		US					,	orated or Qualifed					
	<u></u>						08/19/19						
2. Principal Pla	lace of Business	2a. Mailing	g Address				4. FEI Number			\Box	Applied		
21		26					59-26109	36			Not App		
Suite, Apt. #	#, etc.	Suite,	Apt. #, etc.				5. Certifcate of	f Status Desired			5 Additio		
22		27									Required		
City & State	e	— ·	City & State					mpaign Financing		•	00 мау і		
23		28					Trust Fund				ed to Fee	es	
Zip	Country	Zip ├─i			intry			ation owes the cur			EA L	_	•
24	25	29		30			Personal Pr	operty Tax. Address of New		Yes	₩No		
	9. Name and Address of Current	t Registered A	Ngent		81	Name	JU. Name and	MUUTESS OT NEW	registered F	Aeur			
OSS	, GARY				"	Mairie		_					
3140	60TH STREET, SOUTHWEST				82	Street Add	dress (P.O. Box Nun	nber is Not Accept	able)				
	LES FL 33999												
II/A/ L	EEO 1 E 30393				83							}	
					84	City			FL	85 2	Zip Code		
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11. Pursuant toffice or reagent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	2 and 607.1508 of Florida. Suct tions of, Section	8, Florida Statu h change was a n 607.0505, Flo	tes, the a authorized orida State	bove- d by th utes.	-named cor he corpora	rporation submits this tion's board of direct	s statement for the ors. I hereby acce		changing tment a	j.its.regist s register	tered ed	
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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 suppliemental 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 on 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 changes or of an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP