1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H99989

ROTTI CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
8064 NEWTON ROAD	8064 NEWTON ROAD
JACKSONVILLE FL 32216-5334	JACKSONVILLE FL 32216-5334

FILED Apr 14, 1999 8:00 am Secretary of State

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JACKSONVILLE		JACKSONVILLE FL							
						DO NOT WRITE IN THIS	SPACE	_	
•						3. Date Incorporated or Qualifed			
						02/28/1986		-Kad Far	
2. Principal Pl	lace of Business	2a. Mailing Addres	SS			4. FEI Number	<u> </u>	oplied For ot Applicable	
21		26	 			59-2644183		Additional	
Suite, Apt.	#, etc.	Suite, Apt. #, 6	etc.	. <u></u> -		5Certifcate of Status Desired		Additional equired	
22		27						<u> </u>	
City & State	e	City & State				6. Election Campaign Financing		May Be to Fees	
23		28				Trust Fund Contribution			
Zip	Country	Zip	r	untry		8. This corporation owes the current year In	tangible XYes	□No	}
24	25	29]	30	_	_	Personal Property Tax. 10. Name and Address of New Registered			
	9. Name and Address of Curre	nt Registered Agent		81	Name	IV. Name and Address of New Registered	7.80.11		
COR	NELIUS, BENJAMIN A				(tanto .				
	SOUTHSIDE BLVD.			82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
	E 200						_		Ì
	(SONVILLE FL 32216			83				,	ł
JACK	COUNTLE PL 32216			84	City		85 Zip	Code	
				Ш		FL		giotogod	-
office or r	agistared agent or both in the State	of Florida, Such chang	e was autho <i>nze</i>	an by:	ine comora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	r changing it: intment as re	s registered egistered	
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.05	505, Florida Sta	tutes.				_	
SIGNATURE							_		1
0.012.110.112	Signature, typed or printed name of registered age				t signature requi	ired when reinstating) DATE	ND DIDECT	200 IN 12	É
12.		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS A		□ Addition	7
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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 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.