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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # ICCOOK

 Corporation 	DAGGETT CONSTRUCTION	n Company, inc) ,								
Principal Place of Business Mailing Address							. I YMBIJIN DIER BIEFR BEFOR LINN IN	OL OUR BIBLIO	BIG BLBS BIBN BI	INITERNITATION	
9355 SW 117TH MIAMI FL 33176 US ~	TERRACE	•	9355 SW 117TH TERRACE MIAMI FL 33176				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
							04/06/1987			-C-d C-u	
	ace of Business	2a. Mailing Addres	SS				FEI Number		1	plied For t Applicable	
21	4	26 Suite, Apt. #, e			•		<u>59-2184490</u>		\$8.75 A	_'	
Suite, Apt	#, etc.	27	71C.			5.	Certifcate of Status Desired		Fee Re	quired	
City & State	9	City & State				6.	Election Campaign Financing Trust Fund Contribution	Ĺ	\$5.00 to Added to		
Zip	Country 25	Zip	Co	untry		8.	This corporation owes the curr Personal Property Tax.			□No	
	9 Name and Address of Currer		11	T		10.	Name and Address of New F	Registered	Agent		
DAGGETT, WALTER 9355 SW 117TH TERRACE MIAMI FL 33176				81 82 83 84		Idress (P	.O. Box Number is Not Accepta	pble)	85 Zip C	Code	
11. Pursuant office or reagent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations. Signature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Registere	ed Agent		lired when re	einstating)	DATE			
12.		ND DIRECTORS ☐ DEL	13 575	TITLE			ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition	
TITLE NAME STREET ADDRESS	PTD Daggett, Walter 9355 SW 117TH TERRACE MIAMI FL	_ 566	1.21	NAME	ADORESS						
TITLE NAME STREET ADDRESS	VSD DAGGETT, PRESTON 9355 SW 117TH TERRACE	DE	LETE 2.1	TITLE NAME	ADDRESS				Change	Addition	
1				CITY-S						. 1	
CITY-ST-ZIP TITLE	MIMMI FL	DEI	LETE 3.1	ıme	1-21				Change	Addition	
NAME STREET ADDRESS			3.3		ADDRESS				•		
CITY-ST-ZIP TITLE		□ DEI		CITY-S'	T-ZIP			_	Change	☐ Addition	
NAME STREET ADDRESS			4.3		ADDRESS						
CITY-ST-ZIP TITLE		□ DEI	LETE 5.1	CITY-ST TITLE	I-ZIP			_	☐ Change	☐ Addition	
NAME CTREET ADDRESS				NAME STREET	ADDRESS						

CITY-ST-ZIP 14. Thereby 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 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, from a state of the corporation of the receiver of trustee empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

□ DELETE

Change

Addition