## FILE NOW: FILING FEE AFTER MAY 1-1S \$350.00

PROFIT CORPORATION JANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J93878 1. Corporation Name CHARLES MOCK/CONTRACTOR, INC.

APPROVED P9.192

97 AUG 18 PM 4: 02

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	e of Business  MARCELIA BLVI	Mailing Address	Same		
LOXAULATELLEE, F1. 33470				3. Date Incorporated or Qualified	3a. Date of Last Report
	32 (70			9/18/87	\$/22/96
	Place of Business	28. Mailing Address		4. FEI Number	Applied For
21		26		65-0004390	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2		City & State			Fee Required
City & Stal		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
4	25	29	30		Yes 🗷 No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	istered Agent
1317	ries W. Mock 10 Marcella 4Hatchee, FI.	BLUD.		dress (P.O. Box Number is Not Acceptab	BS Zin Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligate	l Florida. Such change was	authorized by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changing its registered the appointment as registered
SIGNATURE		and the discussion (Alf	III Registered Agent signature requ	instanton material	DATE
12.	Signature, typed or printed name of registered agree.  OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PROCIONIT - DIRECT	OR DELETE	1 1 TITLE		☐ Change ☐ Additio
NAME	PRESIDENT - DIRECT MOCK, CHARLES 13170 MARCELLA B	W. JR.	12 NAME		
STREET ADDRESS	13170 MARCOLLA B	LUDI	13 STREET ADDRESS		
CITY-ST-ZIP	LOXAHATCHEE, FI.	33470	. 14 Cft Y - ST - ZIP		aaanaani
TITLE	SECRETARY	L_J DELETE	21 TITLE	_02/20 _02/20	79701040021
NAME	MOCK, KEVAN E.	4 1	22 NAME		65.00 ****165.00
STREET ADDRESS	13099 MARCELLI	4 BLUD,	2.3 STREET ADDRESS	Territor I	00.00
CITY ST-ZIP	LOXAHATCHEE, F	7. 32470	2 4 CITY · ST · ZIP		D ALLES
MILE		DELETE	3 1 TITLE		Change Additio
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STREET ADDRESS			3 3 STREET ADDRESS		
CITY+\$T-ZIP TITLE	ļ. <del></del>	DETE	3 4. CITY - S1 - ZIP 4 1 TIT( E		Change Additio
NAME			4 2 NAME		Contract Contract
name Streif Address :			43 STREET ADDRESS		
CITY-ST-ZIP			4.4 Ci) Y - S1 - ZiP		
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NAME		<del></del>	5.2 NAME		<b>,</b> —
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	0.00	
TITLE		DELETE	6.1 1171.1	1) ///	Change Addition
NAME			6.2 NAME	U. ag	2/20
STREET ADDRESS			6 3 STREET ADDRESS	F111.	0.197
CITY . CT. 710		/	6.4 CITY - ST - 7IP		
14. I do here	by certify that the information supplied	will this filing goos not qua	lify for the exemption state	ed in Section 119.07(3)(i), Florida Statutes	I further certify that the
information fam an o appears i	on indicated on merannual report or sup officer or director of the corporation or to in Block 12 or Block 13 if changed, or c	и пентритальный придугероги в ne reclaiver of tryslee empo no any altyrophy and with an ac	wered to execute this repositores.	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same lega ort as required by Chapter 607, Florida S	enect as il made under dath; the satutes; and that my name



13170 Marcella Blvd. Loxahatchee, FL 33470 August 3, 1997

Annual Reports Filings Division of Corporations Post Office Box 1500 Tallahassee, FL 32302-1500

Re: DOCUMENT # J93878

To Whom It May Concern:

Enclosed are a renewal form and a check for \$165.00 (One hundred sixty-five dollars).

I did not receive the renewal form (Profit Corporation Annual Report) for 1997. The person with whom I spoke at telephone number 904-488-9000 informed me of the procedure to order the form and advised me to send a letter of explanation.

Respectfully,

Charles Mock