FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K01346

Principal Place of Business

BLUE & ORANGE CONSTRUCTION, INC.

0110 59TH AVE: DR., E. BRADENTON FL 34203 US		3110 59TH AVE. DR. E. Bradenton Fl. 34203 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/06/1987			
2 Principal Place of Business 2a. Mailing Address					4. FEI Number	App'	lied For
2. Fillicipal Fidos of Business		<u>├</u> ─┐ .	uless		59-2857041	Not	Applicable
ı <u> </u>		26			, , , ,	\$8.75 Ac	dditional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Req	uired
2		27			a St. II. O size Financing	\$5.00 k	Jay Be
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	Added to	•
3		28			8. This corporation owes the current year		
Zip ·	Country	Zip	Country	,		∏Yes [□No I
<u>.</u>	25	29	30		Personal Property Tax. 10. Name and Address of New Register		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registe	I GO CHOIN	
 			81	Name			
LEMIEUX, CHRISTOPHER K.				82 Street Address (P.O. Box Number is Not Acceptable)			
3611 TALLEVAST RD SARASOTA FL 34243			10.	3		<u>يو ۾ پوريون جويو</u> ويونو	3. 6139 1981 2. 63 1150
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≅ agent. Fa SIGNATURE	registered agent, or both, in the Statum familiar with, and accept the oblig		E: Registered Ag		red when reinstating) , DA ADDITIONS/CHANGES TO OFFICER		PS IN 12
12.	OFFICERS A	AND DIRECTORS	13.			☐ Change	Addition
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NAME	LEMIEUX, CHRISTOPHER K.		1.2 NAME	:			
,	AUL AAAA AT E		1.3 STRE	ET ADDRESS			
STREET ADDRESS	SARASOTA FL	ř	1,4 CITY	ST-ZIP			
CITY-ST-ZIP	SARASUIA FL	☐ DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
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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 truttee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in CITY-ST-ZIP officer or director of the corporati Block 12 or Block 13 if changes

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

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5.4 CITY-ST-ZIP

SIGNATURE

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CITY-ST-ZIP :

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FILED

Jan 25, 1999 8:00am

Secretary of State

01-25-1999 90036 020 ***150.00

Addition