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

May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K58239 CAVALLO AND TODARO CONSTRUCTION COMPANY INC. Principal Place of Business Mailing Address 120 SE 127TH CT 120 SE 12TH CT POMPANO BEACH FL 33080 POMPANO BEACH FL 33080 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/12/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0093048 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zφ This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TODARO, STEPHEN 120 SE 12TH CT 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33060 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change \_\_\_ Addition TODARO, STEPHEN NAME 12 NAME 120 S.E. 12TH CT. STREET ADDRESS 1.3 STREET ADDRESS POMPANO BCH. FL 33301 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TODARO, STEPHEN NAME 2.2 NAME 120 SE 12TH CT. STREET ADDRESS 2.3 STREET ADDRESS POMPANO FL CITY-ST-21P 2 4 CITY-ST-ZIP DELETÉ Addition 31 TITLE TITLE HAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change \_\_ Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information supplied with this filing gloes 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 of exemplemental 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 trueted employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed. Or of the care with an address

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

april 30,1998 954-522-6622

Change

Addition

Addition

**FILED**