

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

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

04-14-1999 90221 025 \*\*\*150.00

DOCUMENT # K69864

1. Corporation Name

PANKOWSKI CONSTRUCTION COMPANY, INC.

Principal Place of Business

%GARY PANKOWSKI  
6371 PARK STREET  
HOLLYWOOD FL 33024-4120

Mailing Address

%GARY PANKOWSKI  
6371 PARK STREET  
HOLLYWOOD FL 33024-4120

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/02/1989

4. FEI Number

65-0146166

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 11359 S.W. 13TH ST.

26 11359 S.W. 13TH ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 DAVIE, FL.

City & State

28 DAVIE, FL.

Zip Country

24 33325

25

Zip Country

29 33325

30

9. Name and Address of Current Registered Agent

PANKOWSKI, GARY  
6371 PARK STREET  
HOLLYWOOD FL 33023

CHANGE OF  
ADDRESS  
ONLY

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

11359 S.W. 13TH ST.

83

84 City

DAVIE, FL.

FL

85 Zip Code

33325

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME PANKOWSKI, GARY  
STREET ADDRESS 11359 S.W. 13TH ST  
CITY-ST-ZIP FT LAUDERDALE FL 33325

TITLE VPD ☐ DELETE

NAME PANKOWSKI, RICHARD  
STREET ADDRESS 11700 SW 9 COURT  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

CITY  
ONLY

DAVIE, FL. 33325

☒ Change ☐ Addition

CITY  
ONLY

DAVIE, FL. 33325

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE:

GARY W. PANKOWSKI, PRESIDENT

4-11-99

954-236-9455

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)