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

DOCUMENT # K70027

1. Corporation Name

MAAS BROTHERS CONSTRUCTION, INC.

_	
Principal Place of Business	Mailing Address
1923 BARCELONA DR.	1923 BARCELONA DR.
DUNEDIN EL 04000	DUNEDIN EL 24600

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90146 036 ***150.00



Dunedin Fl 34698 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/03/1989 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-2941938 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees 28 Trust Fund Contribution Country Country Zip Zip 8. This corporation owes the current year Intangible □No 25 29 30 Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 MAAS, TODD T. Street Address (P.O. Box Number is Not Acceptable) 82 1923 BARCELONA DRIVE **DUNEDIN FL 34698** 83 84 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DPS ☐ Change ☐ Addition ☐ DELETE 1.1 TITLE TITLE MAAS, TODD T. 1.2 NAME NAME 1923 BRACELONA DR. 1.3 STREET ADDRESS STREET ADDRESS DUNEDIN FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE TITLE MAAS, LOREY S. 2.2 NAME NAME 1247 8TH AVE APT A 2.3 STREET ADDRESS STREET ADDRESS SAN FRANCISCO CA 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change ☐ DELETE ☐ Addition 4.1 TITLE TITLE 4.2 NAME NAME 4,3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-SY-ZIP Addition ☐ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME

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.

6.3 STREET ADDRESS

6 A CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TURE RES

Daytime Phone #

CR2E034 (11/98)

=::