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 # K96311

NAME

STREET ADDRESS

CITY-ST-ZIP

SUMMERS PERINI CONSTRUCTION, INC.

Principal Place of Business Mailing Address						T (AMIRINE AND LANCE RINGS HERD FIRMS HID)	31811 B1811 B1311 B1811 B	
261 E PROSPECT RD		261 E PROSPECT RD	261 E PROSPECT RD					
OAKLAND PARK	• • •	OAKLAND PARK FL 33334	OAKLAND PARK FL 33334			DO NOT WRITE IN THIS SPACE		
US US						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed		
						06/19/1989		
A D::-:! D	an of Dyninona	2a. Mailing Address				4. FEI Number	Ar	plied For
						65-0130902	·	ot Applicable
21 26							\$8.75	
22 27						5. Certifcate of Status Desired	Fee Re	equired
City & State	City & State	/ & State			6. Election Campaign Financing	\$5.00	May Be	
23	·					Trust Fund Contribution	Added t	to Fees
Zip			Country			8. This corporation owes the current ye		_/ \
24	25	29 30				Personal Property Tax.	☐ Yes	ΣNο
	9. Name and Address of Current	Registered Agent		T-:		10. Name and Address of New Regist	ered Agent	
	MAIN AAARW FACCAL		81	Name				
MURPHY, MARY ELLEN			82	82 Street Address (P.O. Box Number is Not Acceptable)				
261 E PROSPECT RD								
UAK	LAND PARK FL 33334		83	1				1
			84	City			FL 85 Zip (Code
At Description of Sections 607 0502 and 507 1508. Florida Statutes the above-parred compration submits this statement for the purpose of changing its registered								registered
11. Pursuant to the provisions of section's section of 0.7. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as 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.								gistered
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regi				nt signature	permper	when reinstating) DA ADDITIONS/CHANGES TO OFFICEF		DE IN 12
12.		DELETE DELETE	13.		V	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	PTD -					POIS Geome A.		-
NAME	PERINI, VINCENT			T 40000000	101	S Proposed Room		ľ
STREET ADDRESS	251 2 1 1151 5251 115		1.3 STREET ADDRESS 26		261	ADIE, George A. E Prospect Road Kland PK, FL 33334	,	
CITY-ST-ZIP	OAKLAND PARK FL	☐ DELETE	1.4 CITY-S	T-ZIP	UA	Mana PK, FC 33337	Change	Addition
TITLE	1 • — — — — — — — — — — — — — — — — — —		2.1 TITLE		1			
NAME	MURPHY, MARY ELLEN		2.2 NAME]			
STREET ADDRESS	261 E PROSPECT RD			T ADDRESS				i
CITY-ST-ZIP			2.4 CITY-5 3.1 TITLE	ST-ZIP	├ ─	·	[] Change	Addition
TITLE		C) DECETE			-			_
NAME			3.2 NAME	* *****	1			
STREET ADDRESS				T ADDRESS	1			ì
CITY-ST-ZIP				ST-ZIP	+-		☐ Change	Addition
TITLE			4.1 TITLE 4.2 NAME					
NAME								
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	i-ZIP	+-		Change	Addition
TITLE		C NETELE	5.1 TITLE 5.2 NAME		1			
NAME				TADDRESS				ļ
STREET ADDRESS			5.4 CITY-S					-
CITY-ST-ZIP			6.1 TITLE	11-ZIP	+-		☐ Change	Addition
TITLE			9.1 11102		1			L

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

6.4 CITY-ST-ZIP

FILED

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90116 027 ***150.00