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 # L90080

1. Corporation Name

BROWN & ROOT BUILDING COMPANY

| Principal Place | or Business | Mailing Address | | | |
|---|--|--|-----------------------|--------------|--|
| 6830 142ND AV | E NO | ATTN: TAX DEPT | | | |
| P.O. BOX 3 | | PO BOX 3 | | | DO NOT WRITE IN THIS SPACE |
| CLEARWATER FL 34620 | | | HOUSTON TX 77001-0003 | | |
| US | | US | | | 3. Date Incorporated or Qualifed |
| | | 2- 4-95 - 4-4 | | · · | 07/31/1990 4. FEI Number Applied For |
| <u> </u> | lace of Business | 2a. Mailing Address | | | |
| 21 | | 26 4100 Clinton Drive | | <u>e</u> | (00010970 |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| 22 | | 27 Attn: Tax Dept. | | | , |
| City & State | e | City & State | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| 23 | | 28 Houston TX Zip Country | | | |
| Zip | Country | — ¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬¬ | | | 8. This corporation owes the current year Intangible Personal Property Tax. |
| 24 | 25 | 29 1702-0 30 | us | | Personal Property Tax. LYes LNo 10. Name and Address of New Registered Agent |
| Name and Address of Current Registered Agent | | | | Name | |
| CT CORPORATION SYSTEM | | | 81 | Name | |
| | | | 82 Street A | | eet Address (P.O. Box Number is Not Acceptable) |
| 1200 S. PINE ISLAND ROAD | | | | | |
| PLAN | NTATION FL 33324 | | 83 | | |
| | | | 84 | City | v 85 Zip Code |
| | | | | , | ſ ŗ∟ ∣ ∫ |
| 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 age | | | nt signature | ture required when reinstating) DATE DATE |
| 12. | | AB BIRLO I GIRLO | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | VT | | .1 TITLE | | ☐ Change ☐ Addition |
| NAME | BLURTON, J.H. | H. 1.2 N | | | |
| STREET ADDRESS | DORESS 4100 CLINTON DR 1.33 | | .3 STREE | TADDRES: | ESS |
| CITY-ST-ZIP | *************************************** | | 4 CITY-S | T-ZIP | |
| TITLE | VSD | ☐ DELETE 2 | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | ARBOUR, P.W. | 2 | 2.2 NAME | | |
| STREET ADDRESS | | | .3 STREET | T ADDRES | ESS |
| GITY-ST-ZIP | MALIGNANI TO THE AC | | 2. 4 CITY-ST-ZiP | | |
| TITLE | AT | | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | LAND, L J | . 3 | 3.2 NAME | | |
| STREET ADDRESS | A A A A A I I MARKET A MARK | | .3 STREET | TADDRES: | ESS |
| CITY-ST-ZIP | | | 4. CITY-S | ST-ZIP | |
| TITLE | DC | | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | LESAR, D J | 4 | 4, 2 NAME. | | |
| STREET ADDRESS | 4444 4444 | | .3 STREET | T ADDRES | ESS |
| | | .4 CITY-S | | | |
| TITLE | PD | | 5.1 TITLE | | Change Addition |
| NAME | | | 2 NAME | | |
| | | | | T ADDRES | ESS |
| STREET ADDRESS | HOUSTON TX | | 4 CITY-S | | |
| CITY-ST-ZIP | HOUSTON IA | | 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | <u> </u> | .2 NAME | | |
| INAME | 1 | | | | 1 |

CITY-ST-ZIP 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 domoration or the deciver 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 charged, or on an attainment with an address, with all other like empowered.

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS