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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

L96221

(1)

J AND R CONTRACTING	IMC

J AND	R CONTRACTING, INC.						
Principal Place	of Business	Mailing Address				.1881 (181 BIBII DIBII	
			CAPSTAN COURT KLEDGE FL 32955				
		US			3. Date incorporated or Qualified 08/15/1990	3a. Date of L 05/0	ast Report 01/1995
2. Principal Pla		2a. Mailing Address			4. FEt Number	990	Applied For
21 174 E	. Hibiscus BLVD.	[26]			59-3027849		Not Applicable
Suite, Apt. #	·	Suite Apt. #, etc			5. Certificate of Status Desired		8.75 Additional Fee Required
City & State	OURNE, FLA. 32901	City & State		·	6. Election Campaign Financing		
23		28			Trust Fund Contribution	S5.00 May Be Added to Fees	
Zφ	Country	Zigi	Coun	l-y	8. This corporation has liability for		
24	25 BREVARD	29	30			s 🗌 No	
	g. Name and Address of Current	Registered Agent		Name	10. Name and Address of New	Registered Ager	1t
			· ·				
	ider, richard A. Alabar road S.W.		8	Street Add	dress (P.O. Box Number is Not Accepta	ble)	
UNIT 1			ε	13			
	BAY FL 32907			M City			-1 3- 0-4-
V			ľ	14 Gity		FL 85	5 Zip Code
12. TITLE	Styrabile, typed or printed name of registors Lagrantia OFFICERS AND		The inequalities of April Septial tree responses to the control of		ADDITIONS/CHANGES TO OF	DATE FICERS AND DIR ☐ C1	
NAME	PD Ainbinder, Richard A.	[_] Steen	1.2 NAN				lange Nation
STREET ADDRESS	160 MALABAR RD SW #116	3		ET ADDRESS			
CITY-ST-ZIP	PALM BAY FL	•		- S1 - Z-P			
TITLE	٧D	DELETE	2 1 TI	.F		Cr	hange 🔲 Addition
NAME	AINBINDER, MARIE F.		2.2 NAN	4.			
STHEET ADDRESS	160 MALABAR RD SW #116	3		LET ADDRESS			
CITY-ST-ZIP TITLE	PALM BAY FL	☐ DELETE	24 CITY 3 1 THI	ST-ZIP			hange
NAME		[_] beeete	3.2 NAM			L 0	- D Madition
STREET ADDRESS				REET ADDRESS			
CITY - ST - ZiP			3.4 CiTy	- \$1 - ZIP	NII. N		
TITLE		☐ DELETE	4 1 TITI	.t		Cr	hange 🔲 Addition
NAME			4.2 NAN				
STREET ADDRESS				TET ADDRESS			
CITY-ST-ZIP TITLE	And the second s	DELETE	4.4 C(T) 5.1 T(T)	- ST-ZIF	A RECORD FOR A CONTRACTOR OF THE PROPERTY OF T	Cr	nange
NAME			5 2 NAN				
STREET ADDRESS				FET ADDRESS			
CITY-ST-ZIF				-SI-ZiF			
TITLE		☐ DELETE	6 1 TiTi			□ Cr	nange 🔲 Addition
NAME			6 2 NAN	rs l			
STREET ADDRESS				IEL ADDRESS			
CITY - S1 - ZIP	1		€ 4 CIT	r - ST - ZIF			

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and ches not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

District Frager 1.