**PROFIT** CORPORATION **ANNUAL REPORT** 



## FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

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AMERICAN CONTINENTAL CONSTRUCTION INC.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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		US					<u> </u>	Date Incom	orated or Quali					l
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Principal Di	ace of Business	120	Malling Address					FEI Numbe				T.	Applied	For
Fillix Dali Fi	ace of business	26						59-28410	126 ·				Not Ap	plicable
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]	25	29	3	0					roperty Tax.			☐ Yes	ΠN	<u> </u>
	g. Name and Address of Current	Regis	tered Agent				10	0. Name and	Address of No	ow Re	Bistotod	Agent		
					81	Name			•					
	NANDEZ, NILO A				82	Street A	Address	(P.O. Box Nur	nber is Not Acc	eptab	le)			
	3 SW 142ND CT				Ц							<u> </u>		
MAIM	Al FL 33186 👙				83		2. 4. 3	•	•		•			
•		. , •			84	City	<del>,</del>					85 Zi	p Code	1
•							•				<u>Fl</u>			
	to the provisions of Sections 607.0502 agistered agent, or both, in the State o m familiar with, and accept the obligati						corporation's	on submits thi	s statement for tors. I hereby a	the p	urpose o the appo	changing intraent as	registe	red .
IGNATURE '	-				• • •				·					{
TOTAL TOTAL	Signature, typed or present name of registered agent			-	Agent	eignature re	required wha			AFF	DATE	ID DIDECT	1 200	N 12
2.	OFFICERS AND	DIRE		13.			<b>7.37</b>	ADDITIONS	CHANGES TO	OFF	CERS A	Chang		Addition
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4. 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 for on an attachment with an address, with all other like empowered.