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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M82470

1. Corporation Name

PINECREST BUILDERS, INC.

Principal Place	e of Business	Mailing Addre	ess					7 102(031) 101 75712 (101) 4721(1)			
% STEVEN GOI	NZALEZ	% STEVEN GO									
13326 SW 28 S		13326 SW 28		•			1	DO NOT WR	ITC IN THIS	SDACE	
DAVIE FL 3333	0-1102	DAVIE FL 3333 US	30-1102				2	Date Incorporated or Qualifed		- OF ACL	····
US		US						05/20/1988			
2. Principal P	lace of Business	2a. Mailing Ad	ddress					FEI Number		A	pplied For
21		26				_		65-00514 <u>19</u>		١	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt	. #, etc.	<i>5</i>			5.	Certificate of Status Desired			Additional Required
City & State		27 City & Sta	ate	~~ <u>~</u>			+-	Election Campaign Financing	_	\$5.00) May Be
	.c	28	,,,,	Des	•			Trust Fund Contribution			to Fees
23 ∮ Zip	Country	Zip		Coul	ntry		-	This corporation owes the cur	rent vear in	tangible	
24	25	29		30		•		Personal Property Tax.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No
24	9. Name and Address of Curren		nt	150				Name and Address of New	Registered	Agent	
_	. Name dia , lea see s. Carre				81	Name					
GON	izalez, steven				20	<u> </u>	(D	O. D. M. Sharia Mat Assess	table)		
1332	26 SW 28 ST			-1	82	Street Addre	ess (P.	O. Box Number is Not Accep	(able)		
DAVI	1E FL 33330			İ	83						
	•				84	City				85 Zip	Code
								t t . t	FL	e	e rogistared
							nration		g purpose oi	changing,	s registereu_
11. Pursuant	registered agent, or both in the State	of Florida. Such ch	jonua Statu jange was a	ies,.ine ai iuthorized	bove-l	named corpo ne corporation	n's boa	ard of directors. I hereby acce	pt the appo	intment as i	egistered
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both in the State am familiar with, and accept the obliga	of Florida. Such chations of, Section 60	nange was a 07.0505, Flo	uthorized orida Statu	bove-l by th ites.	named corporation	n's boa	ard of directors. I hereby acce	pt the appo	intment as I	egistered
11. Pursuant office or ragent. La	im familiar with, and accept the obliga	tions of, Section 60	37.0505, FIG	onda Statt	nes.			·		intment as I	egistered
agent. I a	im familiar with, and accept the obligation in the street of registered ages	nt and title if applicable.	37.0505, FIG	: Registered	nes.	named corporation	when re	einstating)	DATE		
agent. I a SIGNATURE 12.	im familiar with, and accept the obligation of registered age. OFFICERS AN	nt and title if applicable.	17.0505, FIG	E: Registered	Agent s		when re	·	DATE		ORS IN 12
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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 or lap attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

954.370.5722