

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000073322

1. Entity Name
API CONSTRUCTION, INC.



Principal Place of Business
111 E. PALMETTO PARK RD.
BOCA RATON, FL 33432-4808

Mailing Address
111 E. PALMETTO PARK RD.
BOCA RATON, FL 33432-4808



03102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1028700

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEAUX, JAZMIN B
5921 VISTA LINDA LANE
BOCA RATON, FL 33433

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME MEAUX, JAZMIN B
STREET ADDRESS 5921 VISTA LINDA LANE
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE VP
NAME MEAUX, JOHN D
STREET ADDRESS 5921 VISTA LINDA LANE
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE SECR
NAME CAZENAVE, ROBERT
STREET ADDRESS 5921 VISTA LINDA LANE
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000858317
04/01/08-80040-015 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jazmin Meaux

3/11/08

Date

561-392-7120

Daytime Phone #