

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2005 8:00 am
Secretary of State

02-28-2005 90215 035 ***150.00

DOCUMENT # P03000034925

1. Entity Name

CARBO BROTHERS CONSTRUCTION, INC.



Principal Place of Business

550 BUSINESS PARK RD.
BLDG. A4
WEST PALM BEACH FL 33421

Mailing Address

P.O. BOX 213014
WEST PALM BEACH FL 33421

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-0561573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARBO, ANTHONY D
7950 HALL BLVD
LOXAHATCHEE FL 33470

New
address →

7. Name and Address of New Registered Agent

Name CARBO, ANTHONY D

Street Address (P.O. Box Number is Not Acceptable)
800 Crestview Ct. # 816

City Royal Palm Beach FL

Zip Code 33411

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 reinstating)

DATE

Anthony Carbo

2-19-05

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	CARBO, ANTHONY D	
STREET ADDRESS	7950 HALL BLVD	
CITY-ST-ZIP	LOXAHATCHEE FL 33470	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carbo, Anthony D	
STREET ADDRESS	800 Crestview Ct # 816	
CITY-ST-ZIP	Royal Palm Beach, FL 33411	
TITLE	Vice president	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARBO, Daniel P	
STREET ADDRESS	2204 Shoma Dr	
CITY-ST-ZIP	Royal Palm Beach, FL 33414	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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

Anthony Carbo

Date

Daytime Phone #

2/19/05 561-718-8272

50019601
ATTACHMENT

P03000034925

NOTICE OF ELECTION TO BE EXEMPT

Please refer to the enclosed instructions before completing this form.

PAID

SECTION 1: I am applying for exemption as a (Please check only one box in this section):

CONSTRUCTION INDUSTRY "CORPORATE OFFICER" (\$50 APPLICATION FEE REQUIRED)

☒ Officer of a Corporation (Title): VICE PRES. -OR- ☐ Member of a Limited Liability Company (LLC)

NON-CONSTRUCTION INDUSTRY "CORPORATE OFFICER" (NO FEE REQUIRED)

☐ Officer of a Corporation (Title): _____

An officer electing an exemption under chapter 440 Florida Statutes is not entitled to benefits under this chapter.

SECTION 2. To be eligible for an exemption, the corporation of which you are an officer or the limited liability company of which you are a member must be registered with the Division of Corporations of the Department of State. For applicants applying as an officer of a corporation, you must be listed as an officer of the Corporation with the Division of Corporations of the Department of State. Please list the registration number (document number shown on your Uniform Business Report) on file with the Division of Corporations. P03000034925

SECTION 3. This exemption application applies only to the person signing the application, the Corporation/LLC that is listed below; and the scope of business or trade listed:

Corporation or LLC Name: CARBO BROS. CONST. FEIN: 050561513 Telephone: 561-795-6632

Business Mailing Address: P.O. BOX 213014 City: Royal Palm Beach State: FL Zip: 3342 County: PALM BEACH

Scope of Business or Trade of Applicant: Residential Contractor 2. _____ 3. _____ 4. _____

SECTION 4. Please list all certified or registered licenses issued to the applicant pursuant to Chapter 489, F.S. (Contractor's License) N/A

SECTION 5. Does the county or municipality in which your business is located require an occupational license for your business?
☒ Yes ☐ No IF YES, A COPY OF A CURRENT OCCUPATIONAL LICENSE MUST BE ATTACHED.

SECTION 6. Are you affiliated with any corporation (including LLC) other than the corporation (including LLC) to which this application applies?

☐ Yes ☒ No IF YES, PLEASE LIST THE NAME(S) AND FEIN(S) OF THE AFFILIATED CORPORATION(S) OR LLC(S):

NAME: _____ FEIN: _____

SECTION 7. If your corporation or LLC is engaged in the construction industry, you must provide the required proof of ownership in the corporation or LLC.

- A. To be eligible for a construction industry exemption as an officer of a corporation, the applicant must be a shareholder, owning at least 10% of the stock of the corporation. A COPY OF A STOCK CERTIFICATE EVIDENCING THE REQUIRED OWNERSHIP MUST BE ATTACHED.
- B. To be eligible for a construction industry exemption as a member of a limited liability company (LLC), the applicant must confirm ownership of at least 10% of the company. THE REQUIRED OWNERSHIP MAY BE ESTABLISHED BY PRODUCTION OF DOCUMENTATION REFLECTING THE REQUIRED OWNERSHIP, OR BY SUBMITTING A NOTARIZED STATEMENT ATTESTING TO THE REQUIRED OWNERSHIP.

SECTION 8.

FRAUD NOTICE

- A. Any person who, knowingly and with intent to injure, defraud, or deceive the department or any employer or employee, insurance company or any other person, files a notice of election to be exempt containing any false or misleading information is guilty of a felony of the third degree.
- B. Attestation of applicant - By signing below, I attest that I have read, understand and acknowledge the foregoing notice.



SIGNATURE OF APPLICANT

THIS APPLICATION IS CONTINUED ON THE REVERSE SIDE

1996-13367

STATE OF FLORIDA
PALM BEACH COUNTY
OCCUPATIONAL LICENSE

OC-032

CLASSIFICATION

EXPIRES: SEPTEMBER - 30 - 2005

DAVID CARBO CONSTRUCTION INC
CARBO ANTHONY D

** LOCATED AT

6077 NW 56TH CT
CORAL SPRINGS FL 33067-2732

CNTY \$26.25

TOTAL \$26.25

Is hereby licensed at above address for the period beginning on the first day of October and ending on the thirtieth day of September to engage in the business, profession or occupation of:

RESIDENTIAL CONTRACTOR

CRC057115

JOHN K. CLARK, CFC
TAX COLLECTOR, PALM BEACH COUNTY

THIS IS NOT A BILL - DO NOT PAY

PAID: PBC TAX COLLECTOR
\$26.25 OCC 002 00499 09-17-2004

THIS LICENSE VALID ONLY WHEN RECEIPTED BY
TAX COLLECTOR

ATTACHMENT

50019601

P0300000034925

THE



Incorporated under the laws of the State of Florida

CARBO BROTHERS CONSTRUCTION, INC.

Total Authorized Issue
500 Shares \$1.00 Par Value
Common Stock

SPECIMEN

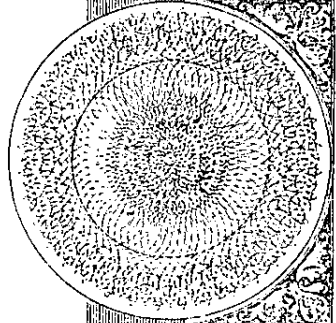
is the owner of

fully paid and

non-assessable shares of the above Corporation transferable only on the books of the Corporation by the holder thereof in person or by a duly authorized Attorney upon surrender of this Certificate properly endorsed.

Witness, the seal of the Corporation and the signatures of its duly authorized officers.

Expd



President