

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90056 004 ***150.00

DOCUMENT # P04000076894

1. Entity Name
PRC CONSTRUCTION CO. OF FLORIDA, INC.



Principal Place of Business
40 MONMOUTH PK HWY
W LONG BRANCH, NJ 07764

Mailing Address
40 MONMOUTH PK HWY
W LONG BRANCH, NJ 07764

40055347



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03312005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

34-1995426

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PCEO
NAME KAYE, ROBERT M
STREET ADDRESS 40 MONMOUTH PK HWY
CITY-ST-ZIP W LONG BRANCH, NJ 07764 ☐ Delete

TITLE EVCO
NAME KOEHLER, KENNETH T
STREET ADDRESS 40 MONMOUTH PK HWY
CITY-ST-ZIP W LONG BRANCH, NJ 07764 ☐ Delete

TITLE EVCF
NAME BRUNDNER, JOEL
STREET ADDRESS 40 MONMOUTH PK HWY
CITY-ST-ZIP W LONG BRANCH, NJ 07764 ☐ Delete

TITLE EVT
NAME KAYE, STEVEN
STREET ADDRESS 40 MONMOUTH PK HWY
CITY-ST-ZIP W LONG BRANCH, NJ 07764 ☐ Delete

TITLE VS
NAME MESSER, DAVID S
STREET ADDRESS 40 MONMOUTH PK HWY
CITY-ST-ZIP W LONG BRANCH, NJ 07764 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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

4/8/05
Date

732-222-2000
Daytime Phone #