## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

TRINITY CONTRACTORS, INC.

(6)

Principal Place of Business

2425 DILLARD STREET

Mailing Address

2425 DILLARD STREET

## **FILED** May 21 1998 8:00am Secretary of State



ORANO PRAIRIE 1X 73031-1078		ORAND PRAIRIE 1X 75051-1075					DO NOT WRITE IN THIS SPACE					
						3.	Date Incorporate 09/04/1992	ed or Qualifi	ed			
2. Principal P	lace of Business	2a. Mailing Address				4.	FEI Number			Aŗ	oplied For	
21	_Same	26					75-175849	9	·	_ No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.	Certificate of Sta	tus Desired		\$8.75		
22 City & City		City & State									pquired	
City & State	9	├ <b>-</b> -¬ '			6.	Election Campai	•	g 🔲	\$5.00	, ,		
<b>23</b> Zip	Country	Ziρ Country				-	Trust Fund Cont		<del></del>	Added		
24	25	<b>├</b> ~	30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No						
	9. Name and Address of Current		<del></del>			10.	Name and Add	<del></del>				
C T CORPORATION SYSTEM					Name		<u> </u>					
	XX SOUTH PINE ISLAND ROAD		82 Street Ac			ddreee (E	P.O. Box Number	ie Not Acco	ntable)	-		
PL/	ANTATION FL 33324		02 Street Au			rauless (r	O. BOX NUMBER	IS INOLACCE	plable)			
			Ţ.	83								
			1	84	City		<del></del>		FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Elerida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE												
12,	OFFICERS AND		Hegistered	Agen	nt signature i		ADDITIONS/CHAI	IGES TO O	DATE CEICEDS AND	DIDECTOR	90 IN 12	
TETLE	PD	DELETE	1.1 100	 I F				curer	FICERS AND	Change	Addition	
NAME	MUNSON, ROBERT, III		1.2 NAI				11 Bates,	a wrer		L ondings	Z VISUNISM	
STREET ADDRESS	2425 DILLARD STREET		1.3 STRE		ADDRESS	2425	Dillard					
CITY-ST-ZIP	GRAND PRAIRIE TX		1.4 CIT		1	Gum	1 Prairie	TX	75051			
TITLE	VD	DELETE	21 TH			9770	a	• / \	7000	Change	Addition	
NAME	JONES, EUGENE		2.2 NAI	ME	1							
STREET ADDRESS	114 SIMMONS		23 STF	REET A	ADDRESS						1	
CITY-ST-ZIP	TRUSSVILLE AL		2 4 CH	TY-S1	T-ZIP							
TITLE	70	DELETE	3 1 TITU	l F						Change	☐ Addition	
NAME	HOPKINS, DILLARD E.		3.2 NAI	ME	4E							
STREET ADDRESS	2425 DILLARD STREET		3.3 STREET ADD		ADDRESS							
CITY-ST-ZIP	GRAND PRAIRIE TX	3.4.0		TY-ST	T- ZIP							
TITLE	VD	☐ DELETE	4.1 TITLE							Change	☐ Addition	
NAME			4. 2 NA	ΜE								
STREET ADDRESS			4.3 STR	4.3 STREET ADDRESS								
CITY-ST-ZIP				Y-ST	-ZIP			····		<del></del>		
TITLE	VD HALL IAMES W	[_] DELETE	5.1 TITL							L Change	Addition	
NAME	HALL, JAMES W.		5.2 NA									
STREET ADDRESS	2425 DILLARD STREET		1		ADDRESS							
CITY-\$T-ZIP	GRAND PRAIRIE TX	DELETE	5.4 CIT		- ZIP					Change	Additor	
TITLE	MARKS, ROBERT	☐ DELETE	6.1 TITL							L Change	L. Addition	
NAME	AAGE DILLADO OTDEET											
STREET ADDRESS	ODAND DONIDLE TV		6.3 STREET ADDRESS 6.4 City-St-Zip									
14. I hereby o	ertify that the information supplied wit	h this filing does not qualify for	the ever	mnti	ion state	d in Section	on 119 07/31/i\ Fir	rida Statute	s I further ce	rtify that the	information	
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 roport or supplicipal annual roport is true and accurate and that my signature shall have the same legal effect as if made undor oath; that I am an officer or director of the corporation or the receiver or true fee 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 op an attachment with an address.												