FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P92000015177 (8)

MACKEY ENTERPRISE CONSTRUCTION, INC.

Principal Place of Business Mailing Address										
4921 SW 88 COOPER CIT	SW 88 TER Er City FL 33328									
							3. Date Incorporated or Qualified 12/24/1992		of Last R 4/27/19	
2. Principal Pla	ce of Business	2a. Mailing	Address				4, FEI Number 65-0377904			Applied For
21 Suite, Apt. #	etc	26 Suite 4	Apt. #, etc.							Not Applicable 5 Additional
22	, 0.0.	27	471. 11, 010.				5. Certificate of Status Desired			Required
City & State		City & :	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28					Trust Fund Contribution			d to Fees
Zip	Country 25	Zip	י ר 🔭 י				8. This corporation has liability for intangible tax under the statutes Yes No			
24	25 29 g. Name and Address of Current Registered Agent			30	<u></u>			ress of New Registered Agent		
	.		9	В	1	Name				
MACKEY, TIMOTHY J 4921 SW 88 TER					2	Street Addres	ss (P.O. Box Number is Not Acceptable)			
	V 88 TER R CITY FL 33328		83							
COOPER	1 OH 1 FE 00020									
				8	4	City		FL	85 Zi	ip Code
or registere	o the provisions of Sections 607.05 ad agent, or both, in the State of Fk n, and accept the obligations of, Se	erida. Such change	was authorized	the above by the cor	rpo	amed corporati ration's board	on submits this statement for the pu of directors. I hereby accept the app	rpose of cha pointment as	anging its i registered	registered office d agent. I am
SIGNATURE	Signature, typed or printed name of registered ag-	of and tile if application	BOTE:	Doorstoad Am	anot.	signature required w	has mart dire.	DATE		
12.		ND DIRECTORS	(NOTE.	13.	POIN	signature rechired w	ADDITIONS/CHANGES TO OF		DIRECTO	ORS IN 12
TIFLE	P\$D		DELETE		1. 1 TITLE				Change	
NAMē	MACKEY, TIMOTHY J			1.2 NAM	E					
STREET ADDRESS	4921 S.W. 88TH TERRACE			1.3 STRE	ET A	ADDRESS				
CITY - S1 - ZIP	COOPER CITY FL 33328			1.4 CITY		- 21P				
THILE.		L] DELETE	2 1 TITU				l	Change	☐ Addition
NAME				2 2 NAMI						
STREET ADDRESS				2.3 STRE						
CHY-ST-ZIP TITLE			7 DELETE	2.4 CITY 3. 1 TITE		- 214	······································	<u>-</u>	☐ Change	☐ Addition
NAME		_		3.2 NAM				•		
STREET ADDRESS						ADDRESS				
CHTY - ST - Z:P				3.4 CITY	- ST	- ZIP				
TITLE			DELETE	4. 1 TITL	£		· · · · · · · · · · · · · · · · · · ·	1	Change	Addition
NAME				4.2 NAM	E					
STREET ADDRESS				4.3 STRE	£1 /	ADDRESS				
CITY-ST-ZIP			- ne iere	4.4 CITY		- ZIP				
1/1[F			DELETE	5. 1 TITL				1	Change	☐ Addition
NAME				5.2 NAM						
STREET ADDRESS				5.3 STRE						
C-TY-ST-ZIP TITLE		F	DELETE	5.4 CITY 6. 1 TITL		- Z1P			Change	Addition
NAME		L	_ >	6.2 NAM				'		
STREET ADDRESS				1		ADDRESS				
CITY - ST - ZIP				6.3 STRE						
	certify that the information supplie	d with this filing is	voluntarily furnish				the exemption stated in Section 119	9.07(3)(k), Fk	orida Statu	ites. I further

certify that the information indicated on this annual report or supplemental annual report is su

SIGNATURE: _

TED NIME OF SIGNING OFFICER OR DIRECTOR

4/30/16 (954)680-7880
Date Date Deptine Prone 1