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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000651

1. Corporation Name

RANGER CONSTRUCTION INC.

• • •	
Principal Place of Business	Mailing Address
301 NW 93 TER PEMBROKE PINES FL 33024	301 NW 93 TER PEMBROKE PINES FL 33024

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90041 025 ***150.00



Principal Place	e of Business	Mailing Address					
301 NW 93 TER 301 NW 93 TER							
PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
	N.				01/01/1993		į
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0373476		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22	• •	27		•	5. Certificate of Status Desired	Fee	Required
City & State City & State					6. Election Campaign Financing		0 May Be
23		28			Trust Fund Contribution	Adde	d to Fees
Zip	Country		Country		8. This corporation owes the current year		S
24	25	29 30			Personal Property Tax.	Yes	No
	9. Name and Address of Current	Registered Agent	-	Nome	10. Name and Address of New Register	ed Agent	
DAN	CED DADLENE A		81	Name	FE KANGER		ļ
RANGER, DARLENE A 301 NW 93 TER PEMBROKE PINES FL 33024		82	Street Address (P.O. Box Number is Not Acceptable)				
		83	301 NW 93 TERRACE				
I CIVII	BROKE TIMES TE GOOZY		83				
	·		84	City	BROWL PINISS F	85 Zi	p Code
							its registered
11. Pursuant i	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes, th Florida. Such change was author	e above zed by	e-named corpo the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered
agent. I ar	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida S	Statutes				
SIGNATURE	In Kangu			nt signature required	d when reinstating) 9-26-9	9	
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	it signatore required	ADDITIONS/CHANGES TO OFFICERS		TORS IN 12
TITLE	D		.1 TITLE		7,65,110,10,10,11,10,10,10	Chang	
NAME	RANGER, LEE		.2 NAME				ļ
STREET ADDRESS	301 NW 93 TER			ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL 33024		4 CITY-S	1.			
TITLE	D		1 TITLE			Chang	e Addition
NAME	RANGER, DARLENE		.2 NAME				
STREET ADDRESS	301 NW 93 TER	•		ADDRESS	•		
CITY-ST-ZIP	PEMBROKE PINES FL 33024	1	4 CITY-S	ì	•		}
TITLE			.1 TITLE			☐ Chang	e 🗌 Addition
NAME		3	.2 NAME				
STREET ADDRESS	;	3	.3 STREE	T ADDRESS			
CITY-ST-ZIP		Ì	.4. CITY-S	it-zip			
TITLE		☐ DELETE 4	.1 TITLE			Chang	e Addition
NAME	· - i	4	. 2 NAME				ļ
STREET ADDRESS		4	.3 STREE	FADDRESS			ļ
CITY-ST-ZIP			4 CITY-S	T-ZIP			
TITLE		☐ DELETE 5	1 TITLE			Chang	je 🔲 Addition
NAME		ŧ	2 NAME	-			1
STREET ADDRESS		. 5	.3 STREE	T ADDRESS			
CITY ST. 7ID		· ·	4 CITY-S	T-ZIP			

CITY-ST-ZIP 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 report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

NAME

L_SZGNATURE ZEADLEANGER
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

□ DELETE

(954) 438-6858

Change

☐ Addition