

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

FILED
Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000007265 (0)**

1. Corporation Name

WILLIAM ZOEPHEL CONTRACTING, INC.

Principal Place of Business

**2217 CYPRESS ISLAND DR #106
POMPANO BEACH FL 33069**

Mailing Address

**2217 CYPRESS ISLAND DR #106
POMPANO BEACH FL 33069**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1993

4. FEI Number

65-0384503

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZOEPHEL, WILLIAM
2217 CYPRESS ISLAND DR #106
POMPANO BEACH FL 33069**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **ZOEPHEL, WILLIAM**
STREET ADDRESS **2217 CYPRESS ISLAND DR #106**
CITY - ST - ZIP **POMPANO BEACH FL 33069**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **OLSEN, BRIAN**
STREET ADDRESS **3571 NW 5TH AVE**
CITY - ST - ZIP **OAKLAND PARK FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **5521 LAKESIDE DR # 203**
2.4 CITY - ST - ZIP **MARGATE FL 33063**

TITLE **D** ☐ DELETE
NAME **DIAMOND, GARY**
STREET ADDRESS **4914 SW 27TH AVE**
CITY - ST - ZIP **FT LAUDERDALE FL 33312**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **MAHOWALD, JEFFREY**
STREET ADDRESS **7910 NW 8TH COURT**
CITY - ST - ZIP **MARGATE FL**

4.1 TITLE ☒ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP **ZIP 33063**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE: X

William Zoephel

3-14-98

919 3497

CP2E034 (10/97)