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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000073378 (0)

BUSIN	IESS BLOCKS, INC.									
Principal Place of Business Mailing Ade				Address			A HARAFARA DIN TOTON ATRIF GRAFF DI	IIII ODIII FOI	(1 10000 HP)	9 1610 1 000 1 1011 160
	rus Spr. Blvd. Hings fl 34434		9317 CITRUS SPRINGS BLY CITRUS SPRINGS FL 34434 US							
			us				3. Date Incorporated or Qualified 10/18/1993	3a , Da	ate of Lasi 04/27/	
Principal Place of Business		2a 26	. Mailing Address	Color	, <	Sor Blud	4, FEI Number 59-3210770		-	Applied For Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.		<u></u>	Spr. Blud	5. Certificate of Status Desired			75 Additional e Required
City & State		28	Citrus S	aria os	,	FI	Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees
Zip 4	Country 25	29	Zip 34434	30 Sur	itry		8. This corporation has liability for Florida Statutes	intangible s □ No	tax under	s 199.032,
	9. Name and Address of	Current Regi	ent Registered Agent				10. Name and Address of New Registered Agent			
					81	Name				
CEPARANO, JOHN					82	Charles Adalas	ess (P.O. Box Number is Not Acceptable)			
9546 N. CITRUS SPRINGS BLVD.					02	Street Addres	s (F.O. box Number is Not Acceptat	леј		
	SPRINGS FL 34434	•		-	83					
0,,,,,,				ļ.					11	
					84	City		F	85	Zip Code
or registere familiar with SiGNATURE	the provisions of Sections bid agent, or both, in the State i, and accept the obligations	of Horida, Sec of, Section 607	ri change was aumor 1.0505, Florida Statuti	es and the trie of	orta	named corporation is board.	ion submits this statement for the pu of directors. Thereby accept the app	rpose of c pointment : DATE	hanging it as register	s registered offic ed agent I am
12.	OFFICE	RS AND DIRE		13.			ADDITIONS/CHANGES TO OFF	ICERS AN	ND DIREC	IORS IN 12
TrTLF	P		DELETE	1 1 11	l F				Chang	je 🔲 Addition
NAME	CEPARANO, JOHN			1.2 NAM	li					
STREET ADDRESS	9546 N. CITRUS SPF			13816	EET	AODRESS				
CITY-ST-7IP	CITRUS SPRINGS FL	<u> </u>		14 CIT	Y - <u>S</u>	r. 7:P				
TITLE	DVP		☐ DELETE	2 1 T IE	Lŧ				☐ Chang	e Addition
NAME	CEPARANO, MARY A			2.2 NAM	Μŧ					
STREET ADDRESS	9546 N. CITRUS SPF			23 STR	EET	ADDRESS				
CITY-ST-ZIP	CITRUS SPRINGS FL	•		2401	Y - S	1-2P				
TITLE			☐ DELETE	3 1 717	LE				☐ Charg	e 🔲 Addition
NAME				3.2 NA	Ťέ					
STREET ADDRESS				33 \$1	4661	ADDRESS				
CITY-ST-ZIP				3.4.CiT		T- 7iP				
T/TLE			☐ DELETE	4 1 1:1					☐ Chang	e 🔲 Addition
NAME				4.2 NAS	1E					
STREET ADDRESS				43 STR	É1	ADDRESS				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

5.4 CITY - ST - ZIP

6.1 1/11/6

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

John J. Cepacuno signat per and type for printed name of signing officer or director

DELFIE

DELETE

4-22-96

352-465-4600

☐ Change

☐ Change

Addition

Addition