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 # P93000075041

1. Corporation Name

W.W. CONSTRUCTION, INC.

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90106 045 ***150.00



_	<u></u>					<u> </u>	di Cal in Ca lin i		
Principal Place of Business Mailing Address						1.021.051.110.121.111.05111.05111			
10400 N.W. 121 WAY 10400 N.W. 121 WAY									
MIAMI FL 33178 MIAMI FL 33178						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	L III IIIO	OI AOL	
						10/25/1993			
2. Principal Pi	2a. Mailing Address	ailing Address			4. FEI Number		<u> </u>	oplied For	
21		26				65-0527320			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 / Fee Re	Additional equired
City & State	e	City & State	-			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Соц	ntry		8. This corporation owes the curre	ent year Inta	angible	
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Cur	rrent Registered Agent				10. Name and Address of New R	legistered /	Agent	****
				81	Name				
JOHNSON, WILLIE B				82 Street Address (P.O. Box Number is Not Acceptable)					
	N.W. 207 STREET								
MIAN	/II FL 33169			83					
į				84	City		FL	85 Zip	Code
711. Pursuant	to the provisions of Sections 607	0502 and 607 1508 Florida State	ites the a	have	a-named con	poration submits this statement for the	nurnose of	changing its	registered
f office or r	registered agent, or both, in the Starm familiar with, and accept the ob	ate of Florida. Such change was :	authorized	i by	the corporati	ion's board of directors. I hereby accep	it the appoir	ntment as re	gistered
SIGNATURE									
ļ <u>.</u>	Signature, typed or printed name of registered	<u> </u>		Agen	t signature require	ed when reinstating)	DATE	D DIDEATA	200 IN 40
12.		AND DIRECTORS	13. ETE 1,1 TITL			ADDITIONS/CHANGES TO OF	-ICERS AN	☐ Change	ORS IN 12 Addition
TITLE	PV	☐ DELETE	- 1			•	,	□ Cilange	
NAME	JOHNSON, WILLIE B		1.2 N						ļ
STREET ADDRESS	861 N.W. 207 STREET		1.3 \$1	REET	FADDRESS				
CITY-ST-ZIP	MIAMI FL 33169		1.4 CT	-	r-zip				Addition
TITLE	VP	☐ DÉLETE	2.1 11	ΠE				Change	☐ Addition
NAME	BREWER, WALTER R		2.2 N	ME	ļ				ľ
STREET ADDRESS	4825 S.W. 82 STREET		2.3 57	REET	TADDRESS				
CITY-ST-ZIP	MIAMI FL 33143		2.4C	ITY-S	T-ZIP .		·		
ππε		☐ DELETE	3.1 1	ΠE	- 1			Change	☐ Addition
NAME			3.2 N/	AME					
STREET ADDRESS			3.3 \$1	REET	T ADDRESS				ļ
CITY-ST-ZIP			3.4. C	ITY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 TT	TLE				☐ Change	☐ Addition
NAME			4. 2 N	AME	Į				
STREET ADDRESS			4.3 \$7	TREET	TADDRESS				,
CITY-ST-ZIP	<u> </u>		4.4 CI	TY-S	T-ZIP				
TITLE		☐ DELETE	5.1 75	1				Change	☐ Addition
NAME		1	5.2 N	AME :	1 1 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
STREET ADDRESS		ų	5.3 \$7	REE	TADDRESS				
CITY-ST-ZIP			5.4 C	TY-S	r-zip _				
TITLE		☐ DELETE	6.1 TI	TLE				☐ Change	Addition
NAME	{		6.2 N/	ME	Į				
STREET ADDRESS		a 1/	6.3 \$1	REET	T ADDRESS				1
CITY ST. 7IP			6.4 CI	TY-S1	T-ZIP				

14. I hereby certify that the information supplied with this filing does not goalify 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 employed 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.

SIGNATURE:

SIGNATURE REQUIRE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR