

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

FILED  
Oct 14 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P93000075143 (6)  
1. Corporation Name  
HERITAGE CONSTRUCTION & DEVELOPMENT CORPORATION



Principal Place of Business  
402 SW 6 ST  
HOMESTEAD FL 33030

Mailing Address  
402 SW 6 ST  
HOMESTEAD FL 33030

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
10/29/1993

2. Principal Place of Business  
21 580 S.W. 12th Ave #28  
Suite, Apt. #, etc.  
22 Homestead, FL.  
City & State  
23  
Zip 24 33030 Country 25 USA  
2a. Mailing Address  
26 Phichol Williams Jr.  
Suite, Apt. #, etc.  
27 16860 SW. 283rd St  
City & State  
28 Homestead, FL.  
Zip 29 33030 Country 30 USA

4. FEI Number  
59-2168731  
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

9. Name and Address of Current Registered Agent

WILLIAMS, PHICHOL SR.  
402 S.W. 6TH STREET  
SUITE 1  
HOMESTEAD FL 33030

10. Name and Address of New Registered Agent

81 Name Phichol Williams Jr.  
82 Street Address (P.O. Box Number is Not Acceptable)  
16860 SW. 283rd Street  
83  
84 City Homestead FL 85 Zip Code 33030

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

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	WILLIAMS, PHICHOL SR.	402 SW 6 ST	HOMESTEAD FL 33030	<input checked="" type="checkbox"/>
VD	WILLIAMS, PHICHOL JR.	402 SW 6 ST	HOMESTEAD FL 33030	<input type="checkbox"/>
STD	WILLIAMS, VINCENT	402 SW 6 ST	HOMESTEAD FL 33030	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/>	<input type="checkbox"/>

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

Phichol Williams Jr.

10-1-98

mobile 786-218-4800  
305-245-1230

CR2E034 (10/97)