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Apr 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000013141 (4)

1. Corporation Name

ARRAZCAETA CONSTRUCTION-ROOFING, INC.

Principal Place of Business

8226 SACRAMENTO DRIVE
~~3384 AMBASSADOR AVE.~~
NEW PORT RICHEY FL 34655
US

Mailing Address

8226 SACRAMENTO DRIVE
~~3384 AMBASSADOR AVE.~~
NEW PORT RICHEY FL 34655-1617
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

02/14/1994

3a. Date of Last Report

04/29/1996

4. FEI Number

59-3223574

Applied For

Not Applicable

6. 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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

ARRAZCAETA, RAMON J
3384 AMBASSADOR AVE.
SPRING HILL FL 34609

10. Name and Address of New Registered Agent

81 Name ARRAZCAETA, RAMON J.

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

9226 Sacramento Dr

83

84 City

New Port Richey

FL

85 Zip Code 34655

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ARRAZCAETA, FERNANDO
STREET ADDRESS 4823 SAN PABLO PL
CITY - ST - ZIP TAMPA FL 34614

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME ARRAZCAETA FERNANDO
1.3 STREET ADDRESS 3128 LATROBE ST.
1.4 CITY - ST - ZIP N.P.R. FL 34655

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

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

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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, unchanged, or on an attachment with an address.

SIGNATURE:

ARRAZCAETA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/97
Date

813-847-7663
Daytime Phone #

0452353

CR2E034 (9/96)