

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

FILED  
May 01, 1999 8:00 am  
Secretary of State

05-01-1999 90073 006 \*\*\*150.00

DOCUMENT # P94000015980

1. Corporation Name

CAPITAL CONSTRUCTION, INC.

Principal Place of Business

1520 BAY SHORE DR.  
COCOA BEACH FL 32931

Mailing Address

1520 BAY SHORE DR.  
COCOA BEACH FL 32931

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/28/1994

4. FEI Number

59-3227337

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 the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

KRONFIELD, FRANK W  
1520 BAY SHORE DR.  
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

81 Name

KRONE

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

TITLE VP  
NAME KRONFIELD, FRANK W  
STREET ADDRESS 1520 BAY SHORE DR  
CITY-ST-ZIP COCOA BCH FL 32931  
☒ DELETE

TITLE ST  
NAME KRONFIELD, SHAUNY S  
STREET ADDRESS 1520 BAY SHORE DRIVE  
CITY-ST-ZIP COCOA BEACH FL 32931  
☐ DELETE

TITLE P  
NAME KRONFIELD, FRANK W  
STREET ADDRESS 1520 BAY SHORE DRIVE  
CITY-ST-ZIP COCOA BEACH FL 32931  
☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRESIDENT  
1.2 NAME SHAUNY S. KRONFIELD  
1.3 STREET ADDRESS 1520 BAY SHORE DRIVE  
1.4 CITY-ST-ZIP COCOA BEACH, FL 32931  
☒ Change ☐ Addition

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

3.1 TITLE PRESIDENT  
3.2 NAME SHAUNY S. KRONFIELD  
3.3 STREET ADDRESS 1520 BAY SHORE DRIVE  
3.4 CITY-ST-ZIP COCOA BEACH, FL 32931  
☒ Change ☐ Addition

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

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

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

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-12-98 (407) 784-2155

Date

Daytime Phone #

0111962

CR2E034 (11/98)