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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ->

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jun 24 1998 8:00am Secretary of State

1. Corporation	CONTRACTOR, INC.	10040249 (2)			
Principal Plac	e of Business	Mailing Address			II DIĐIH ĐĐING NIĐNI ĐIĐIN (ĐIN IDDI
550 S.W. 131ST AVE. DAVIE FL 33325		550 S.W. 131ST AVE. DAVIE FL 33325			
				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address		05/27/1994 4. FEI Number	
21	The state of the s	26			Applied For
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		65-0493076	Not Applicable  \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	☐ Yes ☐ No
g, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
RINGUETTE, BRUCE			81 Name		
550 S.W. 131ST AVE.			82 Street	Address (P.O. Box Number is Not Acceptable)	
DAVIE FL 33325			02		
<u> </u>			83		
			84 City	·	85 Zip Code
11 Pureuant	to the previous of Castiana COVIV	00 cod 007 11 00 Electo Otal dec	the observe accord		FL 65 2.10 GOOD
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. Florida agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typical or pea ten name of repeatore day	and the distance of the second	6		
12.	OLFICERS AN	JD DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	O PRESIDENT	DELETE	1.1 1mus	VOPRESIDENT	Change Addition
NAME	RINGUETTE, BRUCE		1.2 NAME	DEAN PINSUEHO	
STREET ADDRESS	550 S.W. 131ST AVE.		1.3 STREET ADDRESS	DEAN RINGUELLE 550 SW 1312 AUE	
CITY-ST-ZIP	DAVIE FL 33325		1.4 CITY - ST - ZIP	DAVIS F1 33325	
TITLE	0 .	DELETE	21 TITLE		Change Addition
NAME	ringuette, kevin		2.2 NAME		
STREET ADDRESS	550 S.W. 137ST AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33325		2. 4 C(1Y - ST - ZIP		, , , , , , , , , , , , , , , , , , ,
TITLE		L. DELETE	3.1 THTLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 CITY-ST-7IP	-	
TITLE NAME		L'I DELETE	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 C(TY+ST-ZIP 5.1 TIFLE		Change Addition
NAME		E Decert	5.2 NAME		CO cuande CO Modition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELI 1E	6.1 TITLE		Change Addition
NAME			6.2 NAME	<b>4.0000</b> 00225.773 <i>4</i> -06/25/9801012	TO AU
STREET ADDRESS			6.3 STREET ADDRESS	-0 <b>6/</b> 25/8801012	045 1 / / パリ
CITY-ST-ZIP			6.4 CHY-S1-ZIP	***150.00	O NV
44 I boschu o	melika bland shambala kana di dan di	20 N 2 CC 1 1 CC 2	41		

Thereby 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 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 BINGUEITE