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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000063085 (2)

SOUTHERN CONCRETE & FRAME, INC.

**FILED** 

May 07 1998 8:00am

Secretary of State

District Dis	Matter Address		
Principal Place of Business	Mailing Address		THE THE PARTY OF T
12201 NW 35ST	12201 NW 35\$T		·
BAY 337 CORAL SPRINGS FL 33065	BAY 337 CORAL SPRINGS FL 330	165	DO NOT WRITE IN THIS SPACE
US	US		3. Date Incorporated or Qualified
			08/24/1994
2. Principal Place of Business	2a. Mailing Address	124th. Ave	4. FEI Number Applied For
21 3700 NW 124 th. Ave.		124 AUE	
Sulte Apt. #, atc.  Sulte 108	Suite, Apt. #, etc.	08	5. Certificate of Status Desired S8.75 Additional
22 Oui+E 108 :	Gity & State		Fee Required
	28 Coral SpA	zinas FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	7 <sub>(p)</sub>	Country	8. This corporation owes or has paid the current year intangible
make make	— ~ ~	o US	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Re			10. Name and Address of New Registered Agent
GAROFALO, KEITH  81 Name Garofalo Keith			
12201 NW 31ST STREET, BAY 3317/337  82 Street Address (P.O. Box Number is Not Acceptable) A ve.			
83 Suite 108			
		84 City	95 Zin Code
		Cor	21 OPIINGS FL 33065
11. Pursuant to the provisions of Sections 607,0502 an	id 607,1508, Florida Statutes	s, the above-named corp	poration 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 Typod or printed nation of registered agent and  OFFICE BS AND DI		Registered Agon; signature recuir	red when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DELETE	11 HUE	Change Addition
NAME GAROFALO, KEITH		1.2 NAME	with Caracala.
STREET ADDRESS 12201 NW 31ST STREET, BAY	3317/337	1.3 STREET ADDRESS 3	700 NW 124th Ave. Suite 108
CITY-ST-ZIP CORAL SPRINGS FL 33065	0011/001	1.4 CHY-ST-ZIP	oral Springs, FL. 33065
TITLE VS	DELETE	2.1 TITLE	Change Addition
NAME GEPFRICH, TOM		2.2 NAME	•
STREET ADDRESS 11638 NW 27 ST		2.3 STREET ADDRESS	
CITY-ST-ZIP CORAL SPRINGS FL		2.4 CITY - ST - ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	j
CITY-ST-ZIP		3.4. U TY-ST-ZIP	
TITLE	☐ DELETE	4.1 T   F	Change Addition
NAME		4. 2 MF	
STREET ADDRESS		4.3 S EET ADDRESS	
CITY-ST-ZIP TITLE	DELETE	4.4 C Y - ST - ZIP	Change Addition
NAME		5.1 1 LE 5.2 L 1E	C. Change C. Aguillon
STREET ADDRESS			
CITY-ST-ZIP		5.3 ET ADDRESS 5.4 S-ST-ZIP	
TITLE	DELETE	6.1 E	☐ Change ☐ Addition
NAME		6.2 4E	
STREET ADDRESS		6.3 SEET ADDRESS	
CITY-SI-ZIP		6.4 I Y+ST-ZIP	İ
14. Thereby certify that the information supplied with the	nis filing does not qualify for	the eximption 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in			
Block 12 or Block 13 if charigott, or on an attaching ht with an address.			