## 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** 

## DOCUMENT # **P94000065229**

C & C CONSTRUCTION SPECIALTIES, INC.

Principal Plac	ce of Business	Mailing Address			MATING BISBU BEING SIREM HIBIO HAY SADE
1.1	EY DRIVE. SUITE 16	1919 COURTNEY DRIVE. FT MYERS FL 33908	. SUITE 16	DO NOT WRITE IN	TUIC COACE
		· US		3. Date Incorporated or Qualified 08/30/1994	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0532097	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	والمتعارض والمتع	27		5. Certificate of Status Desired	Fee Required
City & Sta	te.	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 the current year	
24	25	29	30	Personal Property Tax.	A Yes □No ″
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registe	ered Agent
	2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Laging Lading . The	81 Name		
	OWTHER, CHRISTY S	er en 1915	82 Street Ad	Idean (D.O. Day Musehan in Nat Assessable)	
	0-1 ROCKFILL RD	ette (, G)	62 Street Ad	dress (P.O. Box Number is Not Acceptable)	
FTI	MYERS FL 33916		83	11. 24. 14. 14. 14. 14. 14.	THE RESIDENCE OF THE STREET
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.11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stat	tutes, the above-named co	rporation submits this statement for the purpos	se of changing its registered
	registered agent, or both, in the State	of Florida, Push shansa was			poointment as registered
OINCE OI	registered agent, or both, in the state	OF PIORUAL SUCH CHANGE WAS	s authorized by the corbora	ition's board of directors, I hereby accept the a	ppointinent as registered
5 agent. La	am familiar with, and accept the obliga	tions of Section 607.0505	Jorida Statutes.	ntion's board of directors. Thereby accept the a	09
OINCE OI	am fomiliar with, end agreem he obliga	kions of Section 607.0505 F	Sauthorized by the corpora Forida Statutes. Sciolent	mon's board of directors. Thereby accept the a	99
5 agent. La	am temiliar with, ento accept he obligation of the obligation of t	kions of Section 607.0505 F	Jorida Statutes.	mon's board of directors. Thereby accept the a	99
Signature	am temiliar with, ento accept he obligation of the obligation of t	wions of Section 607.0505 F	Social Statutes.  CSLOCAT  OTE: Registered Agent signature requirements.	ired when reinstating)	99
SIGNATURE	am temiliar with and accept he obligg stranged in the obligg stranged in the other strength and other strength in the other strength	icons of Section 607.0505 f mand title of applicable. (NO ID DIRECTORS	Formula Statutes.  PSJOEN +  OTE: Registered Agent signature requi	ired when reinstating).	99 E S AND DIRECTORS IN 12
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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.

6.4 CITY-ST-ZIP

**FILED** 

Jan 25, 1999 8:00am

**Secretary of State** 

01-25-1999 90035 007 \*\*\*150.00