
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

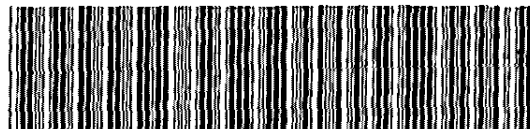
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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• SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

APPROVED
AND
FILED

95 JUN 28 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000086666 (2)

1. Corporation Name

PI CONSTRUCTION CORPORATION

Principal Place of Business

555 ZANG STREET STE. 105
LAKEWOOD CO 80228

Mailing Address

555 ZANG STREET STE. 105
LAKEWOOD CO 80228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/28/1994

3a. Date of Last Report

2. Principal Place of Business

21. 1260 S. JACO

State, Apt., etc.

2a. Mailing Address

26. 1260 S. JACO

State, Apt., etc.

4. FEI Number

84-1199992

Approved For

Not Applicable

22. City & State

27. DENVER CO

City

Country

27. City & State

28. DENVER CO

City

Country

5. Certificate of Status Desired

☐

\$0.75 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

29. 8,1223

25

29. 80223

30

9. Name and Address of Current Registered Agent

CLARY, WILLIAM
339 LAKE MARIETTA DRIVE WEST
JACKSONVILLE FL 32220

81 Name

82 Street Address (P.O. Box Notable: Not Applicable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.05(1) and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

NOTE: Signature of officer or director must be accompanied by a statement of authority.

NOTE: Signature of registered agent must be accompanied by a statement of authority.

CAUTION

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

7. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

8. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12.

1. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

2. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

3. TITLE

NAME

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7. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

8. TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PRESIDENT
GEORGE N. MATHIAM
3304 PERRY LANE
AUSTIN TX 78731

☐ Change ☒ Add

☐ Change ☐ Add

☐ Change ☐ Add

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the provisions stated in Section 119.07(3)(b), Florida Statutes. I do hereby 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/21/95

Date