

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 07 1996 8:00 am
Secretary of State

DOCUMENT # P94000089650 (3)

1. Corporation Name

FRANK MAIO CONTRACTORS, INC.

Principal Place of Business

5733 FUNSTON STREET
HOLLYWOOD FL 33023

Mailing Address

5733 FUNSTON STREET
HOLLYWOOD FL 33023



2. Principal Place of Business	2a. Mailing Address
21 3862 Sheridan Street	26 3862 Sheridan Street
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Hollywood, Florida A	28 Hollywood Florida
24 33021	29 33021
25 USA	30 USA

3. Date Incorporated or Qualified	3a. Date of Last Report
12/12/1994	05/01/1995
4. FEI Number	Applied For
65-0539818	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 has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MURPHY, JOHN J
3860 SHERIDAN STREET
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 of person performing this service (agent, legal representative, etc.)

(Print) Registered Agent signature required when registering

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	☐ Change ☐ Addition
NAME	PUNTES, CHRISTOPHER	1.2 NAME	
STREET ADDRESS	5733 FUNSTON STREET	1.3 STREET ADDRESS	
CITY-STATE-ZIP	HOLLYWOOD FL 33023	1.4 CITY-STATE-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HILL, OLIN	2.2 NAME	
STREET ADDRESS	3862 SHERIDAN STREET	2.3 STREET ADDRESS	
CITY-STATE-ZIP	HOLLYWOOD FL 33021	2.4 CITY-STATE-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-STATE-ZIP		3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 of this report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OLIN HILL

2/2/96

(305) 487-7515

CR2E034 (12/95)