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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

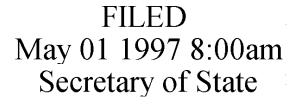
DOCUMENT # P94000093181 (3)

BUCHANON AND SON PLASTERING, INC.

Principal Place	of Business
8102 BAYARD R	

Mailing Address

GIM DAVADO DOAD





FORT PIERCE F	FL 34951	FORT PIERCE FL 34951-1360					
					3. Date Incorporated or Qualified 12/22/1994	3a. Date of Last F	Report
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number		pplied For
21		26			65-0551784	N	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
20 1	Country	Zip	Country		This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30		Florida Statutes	Yes No	
-11	9. Name and Address of Curr				10. Name and Address of New Re	glatered Agent	
BUC	HANON, GREGG		8	1 Name	· ·	F	
	BAYARD ROAD		/	82 Street Address (P.O. Box Number is Not Acceptable)			
	T PIERCE FL 34951				, 000 (1.0, 20x 110mba. 15 110t / 1000pta		
			8	3			
				4 City			Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.0 registered agent, or both in the Starn familiar with, and accept the ob-	502 and 607.1508, Florida State ato of Florida, Such change wa ligations of, Section 607.0505,	tutes, the abo is authorized Florida Statu	ove-named cor by the corpora tes.	poration submits this statement for the pation's board of directors. I hereby acception	urpose of changing at the appointment a	its registered s registered
SIGNATURE		AN Handrakia (A)	IOTE: Degistered	Lagat signatura regu	irad when reinstating)	DATE	
12.	Signal selting of or pointed name of registered	AND DIRECTORS	13.	#Seut signature isdo	ADDITIONS/CHANGES TO OFFIC		RS IN 12
1011	D	DELETE	1,1 DTL	E		☐ Change	
NAME	BUCHANON, GREGG		1,2 NAN		•		
	8102 BAYARD ROAD			EET ADDRESS			
STREET ADURESS	FORT PIERCE FL 34951		•	-ST-ZIP			
COTY - ST - 7IP	TOTAL TELESCOPE	DELETE	2.1 TITE			Change	Addition
NAME			2.2 NAM				
STREET ADDRESS				EET ADDRESS			
				Y+ST-ZIP			
CITY ST ZIF		DELETE	3.1 TiTL			Change	Addition
NAM:			3.2 NAA				
STREET ADDRESS				EET ADDRESS			
(31Y-\$1-72				Y-ST-ZIP			
10th		DELETE	4.1 TOTAL			☐ Change	Addition
NAME			4 2 NA	ME			
STREET ADDRESS				EET ADDRESS			
CHY-ST-ZIP				r-ST-2IP			
TIME		DELETE	5.1 7170			Change	Addition
hAVt		• •	5.2 NA	AE			
STREET ADDRESS				EET ADDRESS			
				Y-ST-ZIP			
CIY ST 769 TITLE	.,.	DELETE	6.1 TITE			Change	Addition
		based or while the	6.2 NA			_	
NAME DAMESTIC ACTION 100			. I	REET ADDRESS			
STREET ACTORESS							
Citr St ZIP	l		6.4 CI1	Y-ST-ZIP			

14. I do 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 are 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.

4-25-97 (561) 465-7242