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 # P95000031632

RANGER CONSTRUCTION SERVICES, INC.							
Principal Place	of Business	Mailing Addre	SS				
7701 HOFFY CII	RCLE	7701 HOFFY C	IRCLE				
LAKE WORTH FL 33467 LAKE WORTH FL 33467						DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualifed
							04/19/1995
2. Principal Pl	ace of Business	2a. Mailing Ad	idress				4. FEI Number Applied For
21		26					65-0586137. Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certificate of Status Desired
22	e sur era	27			<u> </u>		100 10041100
City & State City & State							6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
23	Country .	28		Coun	-tn/		
Zip	Country	Zip	30	٦	iu y		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No
24	9. Name and Address of Currer	29 29 Age		<u>'</u>			10. Name and Address of New Registered Agent
	. Hallo pila Madisos el Gallo.			1	81	Name	
REBBAN, STACEY E 7701 HOFFY CIRCLE LAKE WORTH FL 33467					82	Street A	t Address (P.O. Box Number is Not Acceptable)
						City	FL 85 Zip Code
office or re	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the obligations Signature, typed or printed name of registered age	of Florida. Such ch ations of, Section 60	nange was auth 07.0505, Florida	iorized a Statu	tes.	ie corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered prequired when reinstating) OATE
12.		ND DIRECTORS	, -	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP		DELETÉ	1.1 TITL	LE		☐ Change ☐ Addition
NAME	-		1.2 NAM	ME			
STREET ADDRESS				1.3 STF	REETA	NDDRESS	s
CITY-ST-ZIP	***************************************		1.4 CIT	Y-ST-	ZIP		
TITLE			DELETE	2.1 TITU	LE		☐ Change ☐ Addition
NAME				2.2 NA	ME	1	
STREET ADDRESS				2.3 STF	REETA	NDDRESS	5
CITY-ST-ZIP				2.4 CI	TY-ST	-ZIP	DANGER DANGER
TITLE		L] DELETE	3.1 TITI	LE		Change Addition
NAME				3.2 NA			
STREET ADDRESS				3.3 STF	REETA	ADDRESS	S
CITY-ST-ZIP				3.4. CI1		-ZiP	☐ Change ☐ Addition
TITLE		L	DELETE	4.1 TTT			
NAME				4. 2 NA			
STREET ADDRESS						ADDRESS	S
CITY-ST-ZIP			7 0 = 1 = -	4.4 CIT		ZIP	☐ Change ☐ Addition
TITLE		L	DELETE	5.1 7171			Change Addition
NAME	1			5.2 NA	ME		

of with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information from 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 proceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the chapter of the control of the cont 14. I hereby certify that the information supplied indicated on this annual report or supplied officer or director of the dorporation of the Block 12 or Block 13 if change or the name of the Block 12 or Block 13 if change

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

Addition

Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90045 045 ***150.00