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

Mailing Address

26901 S.W. 143 PLACE

-PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

**FILED** 

Feb 11, 1999 8:00am

**Secretary of State** 

02-11-1999 90040 030 \*\*\*150.00

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000032124

Principal Place of Business

26901 S.W. 143 PLACE

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

PATTON ROBERTS CONSTRUCTION CO., INC.

MIAMI FL 33032		MIAMI FL 33032			DO NOT WRITE IN THIS SPACE		
			٠		3. Date Incorporated or Qualifed 04/20/1995		
	- CP-sin-sin	2a. Mailing Address	a Mailing Address		4. FEI Number	App	lied For
T. THIODAIT ISSUES SECTION					65-0578010	Not	Applicable
21		Suite, Apt. #, etc.				\$8.75 Ad	dditional
Suite, Apt. #, etc.		<del> </del>			5. Certificate of Status Desired	Fee Req	quired
22		City 9 State	City & State		6. Election Campaign Financing	\$5.00 N	May Be
City & State		<del>                                     </del>			Trust Fund Contribution	Added to	
23		Zip	Country		8. This corporation owes the current year In	tangible	
Zip	F-7 ************************************		30		Personal Property Tax.	∐ Yes [	<b>X</b> No
24	25	E-01			10. Name and Address of New Registered Agent		
	9. Name and Address of Curren	t Registered Agent	81	Name	(0. 10. 10. 10. 10. 10. 10. 10. 10. 10. 1		
DODERTO DATTON N			"				
	ERTS, PATTON N.		82 Street Add		dress (P.O. Box Number is Not Acceptable)		
	JNO LAGO DR. #201						673669
JUNC	D BEACH FL 33408		83				
			84	City		85 Zip C	ode'
			1	1 ' '	poration submits this statement for the purpose of the portion's board of directors. I hereby accept the appoint		
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Age	nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
12.		DELETE	1.1 TITLE		the man is a six	☐ Change	☐ Addition
TITLE	POPERTO BATTON N	<u> </u>	1.2 NAME	İ	••		ì
NAME	ROBERTS, PATTON N			T ADDRESS		•	1
STREET ADDRESS	500 UNO LAGO DR. #201		1.4 CITY-9				
CITY-ST-ZIP	JUNO BEACH FL 33408	☐ DELETE	2.1 TITLE	51-21		☐ Change	☐ Addition
TITLE					· ·	•	
NAME			2.2 NAME	T +000500		•	
STREET ADDRESS				T ADDRESS	•		
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		☐ Change	Addition
TITLE		☐ DELETE	3.1 TITLE			_ ,	,
NAME			3.2 NAME				
STREET ADDRESS	, and the second			ET ADDRESS		3. G	
CITY-ST-ZIP			3.4. CITY-			Change	Addition
TITLE		☐ DELETE	4.1 TITLE	!		<del>_</del> , *	
NAME			4. 2 NAM	I .			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		T DELETE	4.4 CITY-			Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	l l	••	_ ,	
NAME				ET ADDRESS	•		
STREET ADDRESS	;				3.3		
CITY-ST-ZIP			5.4 CITY- 6.1 TITLE			Change	Addition
TITLE		☐ DELETE	6.2 NAME				_
1	1		■ to Z NAME		•		

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 supplementar annual report is type 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 truefee of powered 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.