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 # P95000053400

CHAMPION PLASTERING & STUCCO, INC.

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90025 037 ***150.00



		·								
Principal Place of Business Mailing Address										
18275 FLAGSHIP CIRCLE 18275 FLAGSHIP CIRCLE JUPITER FL 33458 JUPITER FL 33458						DO NOT WRITE IN	THIS S	PACE	•	
		•				3. Date Incorporated or Qualifed				l
						07/05/1995	,			i
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applie				l
		26				65-0586877		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 Additional		
2		27				Fee Required				
City & State		City & State				6. Election Campaign Financing		\$5.00 May Be Added to Fees		
		28				Trust Fund Contribution				
Zip Country		Zip	Zip Country			8. This corporation owes the current ye	ar Intar			i
25			30			Personal Property Tax.		Yes	□No	
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Regist	erea A	gent		ĺ
0144	ADION LICE I/			81	Name				_	ĺ
	MPION, LISA K				Street Add	ress (P.O. Box Number is Not Acceptable)				1
	5 FLAGSHIP CIRCLE		Į							ł
JUPI	TER FL 33458			83						Ì
				84	City		Fi	85 Zip	Code	ļ
_				凵			<u>FL</u>	Ц		[
office or re	to the provisions of Sections 607.050: egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Such change was :	authonze	o by t	-named cor he corporat	poration submits this statement for the purpo on's board of directors. I hereby accept the	appoint	ment as re	egistered	
SIGNATURE						ed when reinstating) DA	<u> </u>			
	Signature, typed or printed name of registered agen	t and title if applicable. (NOT D DIRECTORS	E: Registered	Agent	signature requir	ADDITIONS/CHANGES TO OFFICER		DIRECTO	ORS IN 12	á
12.		DELETE 1.1 TO		TI F		ADDITIONS/GHANGES TO GITTOET		Change	Addition	1
TITLE	*1		1	1.2 NAME					-	\ \ <u>\</u>
NAME CHAMPION, LISA K				1.3 STREET ADDRESS						5
STREET ADDRESS	18275 FLAGSHIP CIRCLE			CITY-ST-ZIP			•			5
CITY-ST-ZIP	JUPITER FL	☐ DELETE	2.1 T		-24			Change	Addition	6
TITLE	P CHAMBION CARVE							_ ,	-	
NAME .	CHAMPION, GARY E			2.2 NAME 2.3 STREET ADDRESS						
STREET ADDRESS	18275 FLAGSHIP CIR				. 1	and the second s		-		[]
CITY+ST-ZIP	JUPITER FL 33458			2:4 CITY-ST-ZIP 3.1 TITLE		 	_	Change	Addition	Ι΄
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STREET ADDRESS										ļ
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TITLE				TITLE				Change	☐ Addition	1 (
ì			1	5.2 NAME				_ •		1
NAME					ADDRESS					
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CITY-ST-ZIP TITLE		□ DELETE	6.1 T					Change	Addition	1
				IAME						
NAME	संस्कृत				ADDRESS					
STREET ADDRESS				ITY-ST						
CiTY-ST-ZIP			. 10.40							J

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 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, with all other like empowered.

SIGNATURE: &