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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 # P95000058098

1, Corporation Name

DITOCCO CONSTRUCTION OF PUERTO RICO, INC.

	•								
Principal Place of Business Mailing Address							i) Billi oblet 6	hint totil 4011	18 (8) 8) 1611 1881
2114 N.E. 21ST FT. LAUDERDAI US	<u> </u>	2114 N.E. 21ST ST. FT. LAUDERDALE FL 33305 US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified				
	•=	_			* '	07/25/1995			
2. Principal P	rincipal Place of Business 2a. Mailing Address					4. FEI Number		F	Applied For
21	•	26				65-0603486		1	Not Applicable
	uite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	×		Additional
22		27	27			5. Certificate of Status Desired		Fee F	Required
City & State	City & State					Election Campaign Financing Trust Fund Contribution			May Be d to Fees
Zip	CountryZipCo			ountry 8. This co		8. This corporation owes the curre	ent year Inta	ıngible	_
24	25		30			Personal Property Tax.		☐ Yes	□No
•	9. Name and Address of Curren	it Registered Agent				10. Name and Address of New R	egistered /	gent	
DITOCCO, ANTHONY III				1 Na	ame				1
				2 St	treet Addres	ress (P.O. Box Number is Not Acceptable)			
2114 N.E. 21ST ST.				1_					
FI. I	AUDERDALE FL 33305		8:	3					
			84	4 Ci	itv			85 Zip	Code
				ŀ	•		<u> </u>	ببلب	
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 register 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.									is registered registered
SIGNATURE							DATE		\
	Signature, typed or printed name of registered age			ent sign	nature required v	when reinstating) ADDITIONS/CHANGES TO OFI		D DIRECT	CORS IN 12
12.	OPPICERS AN	OFFICERS AND DIRECTORS 13.			$-\tau$	ADDITIONS/GITANGES TO GIT	IOLINO AIN	Change	
NAME			1.2 NAME						_
			1.3 STREE		DESS !				
STREET ADDRESS			1.4 CITY-		1				
CITY-ST-ZIP TITLE			2.1 TITLE					Change	e 🔲 Addition
NAME			2.2 NAME			•			
STREET ADDRESS	2114 N.E. 21ST ST.		2.3 STREET ADDRESS		DRESS				ĺ
	FT. LAUDERDALE FL		2. 4 CITY-ST-ZIP						J
CITY-ST-ZIP TITLE			3.1 TITLE		- -	·		Change	e 🔲 Addition
NAME	_		3.2 NAME						
STREET ADDRESS	\$		3.3 STRE		RESS !)
CITY-ST-ZIP			3.4. CITY		į.				
TITLE		☐ DELETE	4.1 TITLE		<u> </u>		·	☐ Change	a Addition
NAME		***	4. 2 NAME	E					
STREET ADDRESS			4.3 STRE	ET ADD	RESS				
CITY-ST-ZIP			4.4 CITY-		- 1				
TITLE		☐ DELETE	5.1 TITLE					Change	e 🗀 Addition
NAME			5.2 NAME	Ē				•	
STREET ADDRESS			5.3 STRE	ET ADD	RESS			٠,	
CITY-ST-ZIP."	14 - 15 T	<u> </u>	5.4 CITY-	ST-ZIP	<u> </u>				
TITLE		☐ DELETE	6.1 TTLE					☐ Change	e Addition
NAME		A Second	6.2 NAME	•					ļ
STREET ADDRESS	•		6.3 STRE	ETADO	RESS				1
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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: