## 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 # P95000095428

Corporation Name

## IGNASIL CONSTRUCTION CORPORATION

Principal Place of		Mailing Address		1		
		6660 N.W. 29TH ST				
6660 N.W. 29TH S	ŞT ·	6660 N.W. 291H 51 SUNRISE FL 33313	•	DO NOT WRITE IN 1	THIS SPACE	
SUNRISE FL 33313						
US		00		3. Date Incorporated or Qualifed	•	ļ
				12/18/1995	Applie	d For
		2a. Mailing Address		4. FEI Number		pplicable
2. Principal Plac	ce of Business	<b>├</b> ¬	,	65-0630158	\$8.75 Add	
21		26		5. Certificate of Status Desired	Fee Requi	
Suite, Apt. #,	, etc.	<b>├</b> ──		3. Certificate of States		
22	<u>-</u>	City & State		6. Election Campaign Financing	\$5.00 Ma	- 1
City & State		<b>⊢</b> ,		Trust Fund Contribution	Added to F	-ees
23		28	Country	8. This corporation owes the current ye	ear Intangible	<b>4</b> .
Zip	Country	Zip	<b>→</b>	Personal Property Tax.	Yes	No
24	25	293		10. Name and Address of New Regist	tered Agent	<b></b>
	9. Name and Address of Curr	ent Registered Agent	81 Name			
	· · · · · · · · · · · · · · · · · · ·	我, 我就说:	1 1 1	i N ( A contable)		
GUZN	VAN, IGNACIO	SCATH CI	82 Street Add	ress (P.O. Box Number is Not Acceptable)		,
6660	NW 29TH ST	) (1/2%) ** 7 **	<u> </u>		1914 1914 1915	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SLINE	RISE FL 33313		83		1.翻四百星里	\$1.36.04
00111	1.02 12 000		84 City		85 Zip Co	nde
	·		1 1			raistered
		1 007 4508 Florida Statute	s the above-named cor	poration submits this statement for the purp- ion's board of directors. I hereby accept the	ose of changing its regis	stered
11. Pursuant	to the provisions of Sections 607.0	of Florida, Such change was au	thorized by the corporat	ion's board of directors. Thereby accept the	. чер	]
office or re	egistered agent, or both, in the old m familiar with, and accept the obli	ate of Florida. Such change was au igations of, Section 607.0505, Flori	ida Statutes.			• •
1			Registered Agent signature requir	and when reinstating)	ATE	
SIGNATURE	Signature, typed or printed name of registered	agent and see	Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	Addition
12.	OFFICERS	AND DIRECTORS	13.		☐ Change	
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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 or an attachment with an address, with all effect the empowered.

SIGNATURE:

**FILED** 

Feb 03, 1999 8:00am

**Secretary of State** 

02-03-1999 90001 048 \*\*\*150.00