Apr 15, 1999 8:00 am Secretary of State

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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 # P95000096680

1. Corporation Name

GEORGE W. MURRAY GENERAL CONTRACTOR INC.

Principal Place of Business Mailing Address					t 1887/86) til rikist britt setti detti getti garre sarre sarre sitti ettiri esti tetti setti setti			•
2410 NW 11TH ST		800 W MCNAB RD						
FT. LAUDERDALE FL 33311		FT LAUDERDALE FL 33309			DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed	SPACE	<del></del>	<u> </u>
					12/18/1995			į
0 0-1110	( a of Produces	2a. Mailing Address			4. FEI Number		Applied For	$\dashv$
<del></del>	lace of Business	Hi *			65-0630443		Not Applicat	ıle
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional		
22		27			5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution		led to Fees		
Zip	Country	Zip	Country		8. This corporation owes the current year In	tangible		
24	25	29 30	1		Personal Property Tax.	☐ Yes	□No	_
<u>1</u>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
		•	81	Name				-
MURRAY, GEORGE W			82	Street Addr	t Address (P.O. Box Number is Not Acceptable)			_
	NW 11TH ST		( O ( O ( ) A ( )					
FT. t	Lauderdale FL 33311		83					
•			84	City		85 2	Zip Code	$\dashv$
				-	oration submits this statement for the purpose of	-	·	
agent. I a SIGNATURE	m familiar with, and accept the obligat  Signature, typed or printed name of registered agen	lions of, Section 607.0505, Florida	a Statutes	-	on's board of directors. I hereby accept the appo			
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AF	ND DIREC	CTORS IN 12	
TITLE			1.1 TITLE			☐ Char	nge 🔲 Addi	ition
NAME	MURRAY, GEORGE W		1.2 NAME	ļ				
STREET ADDRESS	2410 NW 11TH ST.		1.3 STREET	ADDRESS				
CITY-ST-ZIP	The second secon		1.4 CITY- S	T-ZIP				
TITLE			2.1 TITLE			Char	nge 🔲 Add	ition
NAME			2.2 NAME					- [
STREET ADDRESS		استنجاب ومرازا بير	2.3 STREET	ADDRESS	2	•		-
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP			<del></del> =	
TITLE		☐ DELETE	3.1 TITLE			Char	nge 🗌 Add	ition
NAME			3.2 NAME		·			
STREET ADDRESS			3.3 STREET	FADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Char	nge 🔲 Add	ition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Char	nge 🔲 Addi	וווסח
NAME			5.2 NAMÉ					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP		,	5.4 CITY-\$	T-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 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS U 2.3.

"一定是我知识。"

TITLE

NAME

CITY-ST-ZIP

OR DIRECTOR

□ DELETE

Change

☐ Addition