FILED

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90298 021 ***150.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000002278

1. Corporation Name

Principal Flace of Business

CHOICE CONSTRUCTION CORPORATION, INC.

1201 SW 83 AV NORTH LAUDER US	/ENUE RDALE FL 33068	1201 SW 83 AVENUE NORTH LAUDERDALE FL 330 US	068	DO NOT WRITE I 3. Date incorporated or Qualifed 01/15/1996	N TIHS SPACE
2 Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 6855	NW ZIST TEER.	26 6855 NW	21st teer	2 65-0630315	No: Applicable
Suite, Apt.		Suite, Apt. #, etc.	<u> ابع</u>		\$8.75 Additional
	DERDALE FLORIDA	27 Ft. LAWSER DA	LE FORIDA	5. Certificate of Status Desired	Fee Required
City & State		City & State		e Election Campaign Financing	\$5.00 May Be
23 3336	09 U.S.A	28 33309	U.S.A	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current	year Intangible
24	25	29	10	Personal Property Tax.	☐ Yes 💆 No
	g. Name and Address of Curren	Registered Agent		10. Name and Address of New Reg	istered Agent
1201 NOR	QUHARSON, LEROY I SW 83RD AVENUE ITH LAUDERDALE FL 33068 to the provisions of Sections 607.050/ egistered agent, or both, in the State of m familiar with any accept the obligat	and 607.1508, Florida Statutes of Florida. Such change was aut op of, Section 607.0505, Florid	83 Ff. 84 City	d corporation submits this statement for the purporation's board of directors. I hereby accept the	FL 85 Zip Code pose of changing its registered le appointment as registered
SIGNATURE	Signature, typed or minted hame of a gistered agen	and title if applicable. (NOTE: R	Registered Agent signature	required when reinstating)	4. <u>23</u> . 99
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIBECTORS IN 12
TITLE	PST	DELETE	1.1 TITLE	PST	Change Addition
NAME	FARQUHARSON, LEROY		1.2 NAME	VINCENT FARQUHARSO	N
STREET ADDRESS	1201 SW 83 AVENUE		1.3 STREET ADDRESS	VINCENT FARQUHARSO	
CITY-ST-ZIP	NORTH LAUDERDALE FL 3306	В	1.4 CITY-ST-ZIP	Ft. LANDERDALE FloR	UDA 33309
TITLE	HOTHIT CAUDETICALL TE GOOD	☐ DELETE	2.1 TITLE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Change Addition
NAME			2.2 NAME		
			2.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		□ DELETE	2.4 CITY-ST-ZIP		Change Addition
TITLE		C SECTION	1		<u> </u>
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	6	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	<u> </u>	Change Addition
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		i
STREET ADDRESS			4.3 STREET ADDRESS	s	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		□ DELETE	51 TITLE		☐ Change ☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further cirtify 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 1.2 or Block 13 if changed with an address, with all other like empowered.

5.1 TITLE

5.2 NAME

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRES S

CITY-ST-ZIP

□ DELETE

☐ DELETE

Daytime Phone #

☐ Change

☐ Addition