PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90031 013 ***150.00

DOCUMENT # P9600002927

1. Corporation Name

BENSON & SONS CONSTRUCTION SUPPLIES INC.

Principal Place of Business
2041 SW 70 AVENUE DAVIE FL 33317

Mailing Address 2041 SW 70 AVENUE

DAVIE FL 33317			DAVIE FL 33317						DO NOT WRIT	TE IN THIS S	SDACE		
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									Date Incorporated or Qualifed				ĺ
									01/05/1996	_			
2. Principal Pl	lace of Business	2a.	Mailing Address	S					FEI Number			Applied For	
21		26	26						<u>65-06484</u> 67			Not Applicat	_
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5.	Certificate of Status Desired			5 Additional Required	'
22]			City & State					-	Election Campaign Financing		<u>\$5.0</u>	0 Mav Be	\neg
City & State	e		Ony a State					Ю.	Trust Fund Contribution			d to Fees	
23	0	28	Zip		ountry			 _		ant voor Into		<u>u 10 1 000</u> _	\dashv
Zip	Country	\vdash	Ζ(μ						This corporation owes the curr	ent year inte	Yes	□No	
24	25	29		30					Personal Property Tax.	amintared &			\dashv
9. Name and Address of Current Registered Agent								10.	Name and Address of New F	egistered A	gent		\dashv
DEM	OON OTERUEN				81	Nar	ne				•		
BENSON, STEPHEN					82	Stre	et Addre	ss (P					
2041 SW 70 AVENUE													
DAVIE FL 33317					83	1							
					-	1				····	85 Zi	p Code	\dashv
	•				84	City	,			FL	183 .	p code	
11 Durauant	to the provisions of Sections 607 050	2 and 6	07 1508 Florida	Statutes, the	abov	e-nam	ed corpo	ration	n submits this statement for the	purpose of c	hanging	its register€	∌d
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 registered 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.													
agent. I a	m familiar with, and accept the obliga-	tions of	, Section 607.05	05, Florida S	tatutes	3 .							
SIGNATURE						. 				DATE			ł
	Signature, typed or printed name of registered ager OFFICERS AN			(NOTE: Registe	3.	nt signat	nue tednited		ADDITIONS/CHANGES TO OF) DIREC	TORS IN 1	
<u>12.</u> .		אוט טואנ	DELI						ADDITIONS/CHANGES TO OF	IOLINO AIN	Chang		
TITLE	D				1 TITLE								
NAME	Benson, Stephen			1.	2 NAME								ļ
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CITY-ST-ZIP	DAVIE FL 33317				4 CITY-S	T-ZIP							distan
TITLE	D		☐ DEL	ETE 2.	1 TITLE						Chang	ge. 🗌 Add	JILON
NAME	BENSON, MARK			2.	2 NAME								Į
STREET ADDRESS	2041 SW 70 AVENUE -		<u>_</u>	2.	3 STREE	T ADDRE	ss	•	erzon en	. 4 -	, -		Î
CITY-ST-ZIP	DAVIE FL 33317		·	2.	4 CITY-5	ST-ZIP							
TITLE				ETE 3.	1 TITLE					•	☐ Chang	ge 🗌 Add	dition
NAME				3.	2 NAME								,

3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition ☐ DÉLETE TIT! F 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

CITY-ST-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 corporator or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, or with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF