## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # **P96000009061** 

ROBERT BLACK INTERIOR CONSTRUCTION, INC.

**FILED** Mar 28 1997 8:00am Secretary of State



Principal Place of Business 14060 LANGELY PLACE DAVIE FL 33325		14	Mailing Address 14060 LANGELY PLACE DAVIE FL 33325-6412				3. Date Incorporated or Qualified 3a. Date of Last Report
							01/26/1996
2. Principal Place of Business 21			2a. Mailing Address 26				4. FEI Number Applied For 65 - 0635559 Not Applicable
Suite, Apt. #, etc			Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
22   City & Sta	n;ε	27	City & State				6. Election Campaign Financing \$5.00 May Be
<b>23</b> Zip	Country	28	Zip	С	ountry		Trust Fund Contribution Added to Fees  8. This corporation has liability for intengible tax under s. 199.032,
24	25]	29		30			Florida Statutes Yes No
	9. Name and Address of Curr	ent Regis	tered Agent		1_	r	10. Name and Address of New Registered Agent
	ACK, ROBERT L				81	Name	e
	080 LANGELY PLACE .VIE FL 33325				82	Street	et Address (P.O. Box Number is Not Acceptable)
					83		
					64	City	85 Zip Code
#4 D	1. M	500 and 0	07 1500 Flacida Deal				FL   50 2.19 and corporation submits this statement for the purpose of changing its registered
office of agent 1 SIGNATURE							or corporation's board of directors. I hereby accept the appointment as registered
12.	Signar de 19 ext se printad name of registerio a OFFICERS A			OTE Regist		ent signature	ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIBLE	PD		DELETE		TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	BLACK, ROBERT L			1.2	NAME		
STHEET ADDRESS				13	STAEET	ADDRESS	s
CITY - ST - ZIP	DAVIE FL 33325			1.4	City-	ST-ZIP	
TITLE	STD		DELETE	2.1	TITLE		Change Addition
NAME	BLACK, ROBERT C			1	NAME		
STREET ADDRESS						T ADDRESS	S
CITY - ST - ZIP	FT LAUDERDALE FL 33302		DELETE		4 CITY - I TITLE	ST-ZIP	Change Addition
Trills NAME	ANDERSON, HERBERT A		F" DELCIE		NAME		La compe La Auditor
STREET ADDRESS	AAAA NE 4A TOODAGE			1		T ADDRESS	s
CHY-SI-ZIP	POMPANO BEACH FL 33064	ļ		1	i Sinet I. City -		
Title			DELETE		TITLE		Change Addition
NAME				4.	2 NAME		
STREET ADDRESS	5			4.3	STREE	1 ADDRESS	s
C(1Y-S1-ZIP				4.4	CITY-	ST-21P	
THILE			☐ DELETE	5.1	TITLE		Change Addition
NAME					NAME		
STHEET ADDRESS	5					T ADDRESS	S
CITY-ST-ZIF			DELETE		CITY-	ST-ZIP	Change Additio
TITLE			⊢ Drreit		TITLE		r cusula r vocato
NAMÉ COURCE ADUACO	. ]				NAME		
STREET ADDRESS	>					T ADDRESS	5
City St. 749	. 1			6.	CITY -	SI-ZIP	

14. I do nereby 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

0205123