

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

FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90132 045 ***150.00

DOCUMENT # P96000018532

1. Corporation Name
J.C. & SON MASONRY INC.

Principal Place of Business
8753 NW 116 TERRACE
HIALEAH FL 33016

Mailing Address
8753 NW 116 TERRACE
HIALEAH FL 33016



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/08/1996

4. FEI Number
65-0640629

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business
21 5720 NW 115 ST
Suite, Apt. #, etc.

2a. Mailing Address
26 5720 NW 115 ST
Suite, Apt. #, etc.

22 City & State
23 Hialeah Florida
Zip Country
24 33012 25 Dade

27 City & State
28 Hialeah, Florida
Zip Country
29 33012 30 Dade

9. Name and Address of Current Registered Agent

GARCIA, JUAN C
8753 NW 116 TERRACE
HIALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name
82 Garcia JUAN C.
83 Street Address (P.O. Box Number is Not Acceptable)
5720 NW 115 ST
84 City Hialeah FL 85 Zip Code 33012

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	GARCIA, JUAN C	8753 NW 116 TERRACE	HIALEAH FL 33016	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D	Garcia, JUAN C.	5720 NW 115 ST	HIALEAH, FL 33012	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/99 305 362-9046

Date

Daytime Phone #

CR2E034 (11/98)