## 4/0-97 3-4340 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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9. Name and Address of Current Registered Agent

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

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POCUMENT # P96000051286 (8)

A & R CONSTRUCTION, INC.

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Principal Place of Business Mailing Address 9681 SE 143RD ST 9681 SE 143RD ST SUMMERFIELD FL 34491-3643 SUMMERFIELD FL 34491 3. Date incorporated or Qualified 3a. Date of Last Report 07/14/1996 NIB 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3387629 21 26 Suite Apt # etc Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing

10. Name and Address of New Registered Agent 81 Name ABBATIELLO, JOSEPH 9681 SE 143RD ST 82 Street Address (P.O. Box Number is Not Acceptable) SUMMERFIELD FL 34491 83 84 City Zip Code

Country

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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						
	IGNATURE Signedular proced name of registered agons and bits if apposable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND		
THUE	U	☐ DELETE	1.1 TITLE		Change	Addition
NAME	ABBATIELLO, JOSEPH		1.2 NAME			ļ
\$16EFT ADORESS	9681 SE 143RD ST		1.3 STREET ADDRESS			
CHY-ST-ZIP	SUMMERFIELD FL 34491		1.4 CITY - ST - ZIP			
TITLE	D	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	ABBATIELLO, PATRICIA		2.2 NAME			
STREET ADDRESS	9681 SE 143RD ST		23 STREET ADDRESS			Į
CffY-S1-742	SUMMERFIELD FL 34491		2 4 City-ST-ZiP			
THE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			ĺ
CHY-51-ZIP			3.4. CITY - ST - ZIP			
THILE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			43 STREET ADDRESS			
CITY - ST - ZiP			4.4 CITY-ST-ZIP			
T-TLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
City-St-ZiP			5.4 CITY-ST-ZIP			
THEF		DELETE	6.1 TITLE		Change	Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRÉSS			
CITY \$1-709			64 CITY-ST-ZIP			

14. I do 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.

Patricia Abbatiello 4-6-97 352-288-8717

**FILED** 

Apr 10 1997 8:00am

Secretary of State

This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes Vo

Trust Fund Contribution

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be Added to Fees

Not Applicable