Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90103 022 \*\*\*150.00

## 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

## DOCUMENT # P96000053199

1. Corporation Name

A&C BUILDING INSPECTIONS, INC.

ı						
Principal Plac	e of Business	Mailing Address				
4262 NORTHLA	KE BLVD #215	4262 NORTHLAKE BLVD #	/215			
PALM BEACH	GARDENS FL 33410	PALM BEACH GARDENS F	FL 33410	DO NOT WRITE IN Th	IC CDACE	
				DO NOT WRITE IN TH	IS SPACE	
-				3. Date Incorporated or Qualifed 06/20/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Ni mber	<u> </u>	ed For
21		26		65-0688427		Applicable
Suite, Ast.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 At	
22		27		3.	Fee Reg	ured
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 +/	•
23		28		Trust Fund Contribution	Added to	Fees
Zip	Cour try	Zip	Country	8. This corporation owes the current year		5
24	25	29	30	Persor al Property Tax.	Yes N	JNo.
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent	
LCU	D IOUN C ID		81 Name (	EM, JOHN CJR		
LEHR, JOHN C JR			82 Street Acd	ress (P.O. Box Number is Not Acceptable)		
	31 HUNT CLUB LANE		437	9 HICKORY DR.		
PAL	M BEACH GARDENS FL 33418		83	U		]
			84 City 📆		85 Zin C	rde
				im BCH CALDENS F	L   <u>፝   33</u> ኝ	$ -\mathcal{B} $
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	tes, the above-named corp	poration submits this statement for the purpose	of changing its r	gistered
office or r agent. a	egistered agent, or both, in the State om m familiar with, and accept the obligat	of Florida. Such change was a ions of, Section 607.0505, Flo	nuthorized by the corporationida Statutes.	ion's board of cirectors. I hereby accept the app	:ointment as reg	stered
SIGNATURE						
	Signature, typed or printed name of registered agent		:: Registered Agent signature require		ND DIRECTOR	C IN 12
12	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	DPST	DELETE	1.1 TITLE	TOWN C TO		
NAME	LEHR, JOHN C JR		1.2 NAME	1270 11 Was NO		
STREET ADDRESS	10231 HUNT CLUB LANE		1.3 STREET ADDRESS 43	1517 Mikary DC	27410	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33		1.4 CITY-ST-ZIP	EHR, JOHN C. IR 1379 HICKORY DR ALM BELL GANDENS, FL.	<u> </u>	
TITLE		☐ DEFELE	2.1 TITLE		Change	Addition \
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CITY-ST-ZIP			
TITLE		. DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS	}		3.3 STREET ADDRESS			\
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE						
NAME		☐ DELETE	4.1 TITLE		Change	Addition
STREET ADDRESS	<b>\</b>	☐ DELETE	<del> </del>		Change	Addition
CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4. 2 NAME		Change	Addition
		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		☐ Change	Addition
			4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		☐ Change	☐ Addition
TITLE		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS			
NAME			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME			
TITLE NAME STREET ADDRESS			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	·	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS	·		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

14. 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 indicate 1 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 of 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 of an attachment with an address, with all other like empowered.