PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000066847**1. Corporation Name

PINKERTON CONSTRUCTION, INC.

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90261 026 ***150.00

Principal Place of Business			Mailing Address							P111 4 6 11 8 1 18111	BIBILIBEL HOUS
2510 LAKE DRIVE NORTH		251	2510 LAKE DRIVE NORTH								
			YNTON BEACH FL 334	35			1	DO NOT WEE	TE IN TUIC	SDACE	
								DO NOT WRI Date Incorporated or Qualifed	1E IN I DIS	SFACE	
							3.	08/08/1996)
2 Principal P	lace of Business	23	Mailing Address				- 4	FEI Number		I Ac	plied For
	iace of ousiness	26	Mailing Address				-	65-0696093			t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					· · · · · · · · · · · · · · · · · · ·		\$8.75	
22		27	27				5.	: Certifcate of Status Desired		Fee Re	equired
City & State			City & State				6.	Election Campaign Financing		\$5.00	May Be
23		28						Trust Fund Contribution		Added	to Fees
Zip	Country		Zip	Co	untry		8.	. This corporation owes the curr	ent year Int	angible	
24	25	29		30				Personal Property Tax.		Yes	□No ·
	9. Name and Address of Curre	nt Regis	tered Agent				10.	Name and Address of New I	Registered	Agent	
					81	Name		,			
	KERTON, JOHN H JR.				82	Street	Address (F	P.O. Box Number is Not Accepta	able)		
2510 LAKE DR., NORTH						oli cel Adi		· · · · · · · · · · · · · · · · · · ·	<u>, , , , , , , , , , , , , , , , , , , </u>	· ·	
BOY	NTON BEACH FL 33435				83						
					84	City			• • •	85 Zip	Code
					04	City			FL	. 55 2.5	
office or t	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and accept the obligations are secured to the control of the	of Floridations of,	la, Such change was a Section 607.0505, Fk	uthorize orida Sta	tutes	the corp	oration's D	oard of directors. I nereby acce	pt the appoi	ntment as re	gistered
	Signature, typed or printed name of registered age			Registere		t signature r	required when	ADDITIONS/CHANGES TO OF		D DIRECTO	DS IN 12
12.	OFFICERS AF	אט טואב	DELETE	_	TILE		1	ADDITIONS/CHANGES TO OF	FIOLIS AI	Change	Addition
TITLE	* · · · · .				AME						_
NAME	PINKERTON, JOHN JR.					ADDRESS					h
STREET ADDRESS	1 <u> </u>			1							
CITY-ST-ZIP	BOYNTON BEACH FL 33435		☐ DELETE	_	CITY-S	1-212	<u></u>			☐ Change	Addition
TITLE	D D				NAME						_
NAME	PINKERTON, JOHN JR.							•			
STREET ADDRESS						ADDRESS	}				1
CITY-ST-ZIP	BOYNTON BEACH FL 33435		☐ DELETE		CITY-S	1-ZIP	 			Change	Addition
TITLE				ı	AME					_	_
NAME						ADDRESS					
STREET ADDRESS											
CITY-ST-ZIP			☐ DELETE		CITY-S	1-212				[] Change	Addition
TITLE			C Deceie		NAME					~ •	
NAME						r address					j
STREET ADDRESS					ony-s		1				İ
CITY-ST-ZIP TITLE	1										
			☐ DELETE			1-21				Change	Addition
NAME			☐ DELETE	5.1	TITLE NAME	1-21			<u> </u>	Change	Addition
			☐ DELETE	5.11 5.21	TITLE NAME	raddress			<u>.</u>	Change	Addition
STREET ADDRESS			☐ OELETE	5.1 5.21 5.3	TITLE NAME STREET	r address	_			Change	Addition
CITY-ST-ZIP				5.11 5.21 5.33 5.44	TITLE NAME	r address				Change	Addition
CITY-ST-ZIP			☐ OELETE	5.17 5.21 5.33 5.44 6.17	TITLE NAME STREET	r address				,	
CITY-ST-ZIP				5.17 5.21 5.33 5.44 6.1 6.21	TITLE VAME STREET CITY-S TITLE VAME	r address			<u>.</u>	,	

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 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 attemment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

VOHN H. PINKEROW JR 3-799 561-7339610