PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000014629

1. Corporation Name

JRB STUCCO, INC.

Principal Place	of Business

Mailing Address

475 NW 46TH AVENUE PLANTATION FL 33317

475 NW 46TH AVENUE PLANTATION FL 33317

Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90022 020 ***150.00



DO NOT WRITE IN THIS SPACE

						.	02/12/1997					
2. Principal P	lace of Business	2a. Mailing Address					4. FEI Number	A	Applied For			
21		26	า ั				- 1	65-0741233		Not Applicable	١.	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			-		_ \$	8.75	Additional		
22	,	27	7					5. Certificate of Status Desired	Fee F	Required		
City & State	e		City & State					6. Election Campaign Financing	\$5.00	0 мау Ве	ļ	
23		28						Trust Fund Contribution	Added	to Fees		
Zip	Country		Zíp	Country				8. This corporation owes the current year Intangi				
24	25	29	3	0				Personal Property Tax.	Yes	□No_		
	9. Name and Address of Current	Registe	red Agent					Name and Address of New Registered Age	nt		ļ	
,						Name						
	ORTH, SCOTT A					82 Street Address (P.O. Box Number is Not Acceptable)						
2021	TYLER STREET				"	0.00017	a a, 656				=	
HOL	LYWOOD FL 33020				≅ 83					ĺ	İ	
						Oit.		8	s Zir	Code	1	
	,				84	City		FL °	2 21	Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607	7.1508, Florida Statutes	, the	above	-named c	orpora	ition submits this statement for the purpose of char	nging i	ts registered		
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida	i. Such change was aut	norize	d by	tne corpor	ation's	s board of directors. I hereby accept the appointment	ent as r	registered		
"	m ramiliar with, and accept the obligation	ins oi, s	section 607,0505, Fioric	ia Sta	ituics.	•						
SIGNATURE	Signature, typed or printed name of registered agent	and title if a	applicable (NOTE: R	legistere	d Agen	t signature rec	ouired wh	nen reinstating) DATE		 '	ء ا	
12.	OFFICERS AND			13				ADDITIONS/CHANGES TO OFFICERS AND D	IRECT	ORS IN 12	ğ	
TITLE	D		☐ DELETE	1.1	MILE	T			Change		1	
NAME	BRYAN, JUSTIN R JR			1.21	AME	I					2	
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NAME						ADDRESS						
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NAME					NAME						1	
STREET ADDRESS						ADDRESS		•				
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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.