FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT # P97000017467 (6)

ATLANTIC SOUTHERN PAVING OF CENTRAL FLORIDA, INC

FILED Mar 16 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | | | | 1 00011001 110 10113 19011 80111 00111 0 | Litt Animi filli | | 1111 | f 1484 (48) | |
|---|--|-----------------------------|---|---|----------------------------------|--|--|--------------------------|--------------------------|--|--|--------------------------|-------------------|------------------|-------------------------|--------------|
| 1421 N.W. 65TH AVE. 1421 N.W. 65TH AVE. | | | | | | | | | | Ì | | | | | | |
| PLANTATION FL 33313 | | | | | PLANTATION FL 33313 | | | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| | | | | | | | | | | | Date Incorporated or Qualified 02/24/1997 | | | | | 7 |
| 2. Principal Place of Business | | | | | 2a. Mailing Address | | | | | | 4. FEI Number | | | Apr | olied For | ┪ |
| 21 | | | | | 26 | | | | | | | | X | | Applicabl | 0 |
| Suite, Apt. #, etc. | | | | | Suite, Apt. #, etc. | | | | | | E Cortificate of Status Desired | | | | dditional | コ |
| 22 | | | | | 27 | | | | | | 5. Certificate of Status Desired | ب | Fe | e Plec | ulred | |
| City & State | | | | | City & State | | | | | | 6. Election Campaign Financing | | \$5. | 00 | Vlay Be | |
| 23 | | | | | 28 | | | | | | Trust Fund Contribution | | Add | ded to | Fees | ╛ |
| Zip | Country | | | | <u> </u> | | | ountry | | | 8. This corporation owes or has pa | _ | | | | |
| 24 | 25 9. Name and Address of Current | | | | 29 30 | | | | | | Personal Property Tax due June | | Yes | | No | 4 |
| | | | ddress of C | urrent Reg | jistere | a Agent | | 81 | Name | | 10. Name and Address of New Re | gistered | agent | | | 4 |
| | JRRY, MICH | | _ | | | | | 01 | Marrie | , | | | | | | |
| 1421 N.W. 65TH AVE. | | | | | | | | 82 | 2 Street Addr | | s (P.O. Box Number is Not Acceptal | ole) | | | | ٦ |
| PLANTATION FL 33313 | | | | | | | | | | | | | | | | 4 |
| | | | | | | | | 83 | | | | | | | | |
| | | | | | | | | 84 | City | | | | 85 | Zip C | ode | ヿ |
| | | | | | | | | | Ĺ | | | <u>FL</u> | <u> </u> | | | _ |
| office or re agent. La | to t he provisi egi ste red age m fam iliar wit | ons of ent, or h, and | Sections 60 both, in the accept the | 7.0502 and State of Flo obligations | 1 607.1 prida. \$. of, So | 508, Florida Stat Such change wa etion 607.0505, | lutes, the s authoriz Florida St | above ed by atules | e-named the cor 3. | d corpor rporation | ation submits this statement for the jobs board of directors. I hereby accellate | ourpose of pt the app | chang: ointmen | ng its t as r | registered egistered | ' |
| SIGNATURE | | | | | | | | | | | | | | | | |
| | Signature, typed | or builted | | | | | | | ent signatur | re required | when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE | BIREO | TODO | 101.10 | 4 |
| TITLE | TDP . | | OFFICER | S AND DIR | EUIO | DELETE | 13 | TITLE | | Т | ADDITIONS/CHANGES TO OFFIC | JEHS AND | Char | | Addition | ,- ; |
| | CURRY, | МІСН | ΔFI | | | | | | | | | | L.J VINDI | .Ac | Rodillo | <u> </u> |
| NAME | 1421 N.\ | | | | | | | NAME | 0030000 | ŀ | | | | | | - 18 |
| STREET ADDRESS | | | FL 33313 | | | | | | ADDRESS | | | | | | | į |
| CITY-ST-ZIP TITLE | DST | 1,0,1 | 2 00010 | | | ☐ DELETE | | CITY-S TITLE | I - ZIP | | | | ☐ Char | | Addition | <u>, </u> ; |
| NAME | CURRY, | DERR | AA | | | | | NAME | | | | | | ,An | | |
| STREET ADDRESS | 1421 N.\ | | | | | | | | ADDRESS | İ | | | | | | Ì |
| CITY-ST-ZIP | | | FL 33313 | | | | | CITY-5 | | | | | | | | |
| TITLE | | | | ··· | | DELETE | | TITLE | 01 - ZIF | - | | | Chan | 106 | Addition | \forall |
| NAME | | | | | | | | NAME | | | | | | . - | | 1 |
| STREET ADDRESS | | | | | | | 1 | | ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | | | | CITY-S | | | | | | | | |
| TITLE | | | | | | DELETE | | TITLE | | | | | Chan | ge | ☐ Addition | 7 |
| NAME | | | | | | | 4.2 | NAME | | | | | | | | |
| STREET ADDRESS | | | | | | | 1 | | ADDRESS | | | | | | | 1 |
| CITY-ST-ZIP | | | | | | | | CITY-S | | | | | | | | |
| TITLE | | | | | | ☐ DELETE | | TITLE | | 1 | | | Chan | ge | Addition | |
| NAME | | | | | | | 5.21 | NAME | |] | | | | | | |
| STREET ADDRESS | | | | | | | | | ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | | | | 7 | | CITY-SI | | | | | | | | |
| TITLE | | | | | | DELETE | | TITLE | | 1 | | | Chan | ge | Addition | 1 |
| NAME | | | | | | | 6.21 | MAME | | | | | | | | |
| STREET ADDRESS | . t. | | | | | | | | ADDRESS | | | | | | | 1 |
| CITY-ST-ZIP | | | | | | | | CITY-SI | | | | | | | | |
| | | | | | | | | | | | | | | | | |

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.

3/1/11

954-581-5805