PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # **P97000047825** BOARD CONSTRUCTION CO., INC.

May 03, 1999 8:00 am Secretary of State

05-03-1999 90088 006 ***158.75



•					
Principal Plac	e of Business	Mailing Address		T SERVICE TO THE CONTRACT OF T	
301 DUQUE RD 301 DUQUE RD					
LUTZ FL 33549 LUTZ FL 33549					0.004.00
•		•		DO NOT WRITE IN THI	S SPACE
		`		3. Date Incorporated or Qualifed	
		· La Gallina Address		05/30/1997 4. FEI Number	Applied For
	lace of Business	2a. Mailing Address		59-3439937	Not Applicable
21 30	<u> </u>	26 SAM & Suite, Apt. #, etc.		39-3439937	\$8.75 Additional
Suite, Apt.	#, etc.	⊢1	- /	5. Certifcate of Status Desired	Fee Required
City & Stat		27 City & State		6. Election Campaign Financing	\$5.00 May Be
n .´ . t	T 2 61	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zha	Country	8. This corporation owes the current year l	
24 ~ 7 7			10	Personal Property Tax.	Yes □No
24 7 7	9. Name and Address of C		, , , , , , , , , , , , , , , , , , ,	10. Name and Address of New Registere	Agent
	3		81 Name	Label Santa	
BOARD, DEBBIE L				A POR CONTRACTOR	<u> D</u>
301 DUQUE RD			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
LUT	Z FL 33549		83	01 124 44	
	•	,	84 City	F	85 Zip Code
office or agent. I a	to the provisions of Sections Streegistered agent, or both, in the arm familiar with, and locker the Signature, typed or printed name of register	State of Frida. Such change was full obligations of, Section 607.0505, Florid	s, the above-hamed corp horized by the corporation da Statutes.	oration submits this statement for the purpose on's board of directors. I hereby accept the app	26 - 79
12.		RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PVPS	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BOARD, DEBBIE L		1.2 NAME		İ
STREET ADDRESS	ANA BUILDINE BOAR		1.3 STREET ADDRESS	`	
CITY-ST-ZIP	LUTZ FL 33549		1.4 CITY-ST-ZIP		
TITLE	CO.12 (2 000 ID	☐ DELETE	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	<u> </u>	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	• .	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	1		5.2 NAME	•	
STREET ADDRESS	,		5.3 STREET ADDRESS		\
CITY-ST-ZIP	Ί .		I		ı
TITLE			5.4 CITY-ST-ZIP	•	
		☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
		DELETE		· .	☐ Change ☐ Addition
NAME		DELETE	6.1 TITLE		☐ Change ☐ Addition
		. DELETE	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition

14. 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 of 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 officer or director of the corpor Block 12 or Block 13 if change

SIGNATURE: