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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P97000073248**1. Corporation Name

D.C. PROJECT & CONSTRUCTION MANAGEMENT INC.

Principal Place of Business
8208 SARADOZA COURT

Mailing Address

8208 SARAGOZA COURT

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90177 039 \*\*\*150.00



ORLANDO FL 192836		OHLANDO NJ. 32836		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
		To be with a literature			08/22/1997		A li-d Fa-
ا منم	ace of Business INTERNATIONAL DR.	2a. Mailing Address			4. FEI Number		Applied For
		26 9101 INTER	NATK.	JNAL DK.	59-3470939	- 60.7	Not Applicable
Suite, Apt.	#, etc. <b>TE 1010</b>	Suite, Apt. #, etc.		5. Certifcate of Status Desired		5 Additional Reguired	
City & State		City & State		6. Election Campaign Financing	\$5	00 May Be	
	ANDO, FLORIDA	28 ORLANDO, F	FL.		Trust Fund Contribution		led to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year In		
24 328	19 25 U.S.A	29 32819 30	US	A	Personal Property Tax.	Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
	L, FRANK L		82	Street Address	ss (P.O. Box Number is Not Acceptable)		
	WEST CANTON AVENUE			Olifect Address			
	E 410		83				
WIN	TER PARK FL 32789		84	City		85	Zip Code
	Λ .		04	City	FL	_   ``	'
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes, f Florida, Such change was auth	the above orized by Statutes	e-named corpor the corporation	ration submits this statement for the purpose o i's board of directors. I hereby accept the appo	intment a	j its registered s registered
	III lamiliai wiiri, artu accepi ure obrigane	one of, decilon our loods, Florida	2 Clatato	•	APRIL 28 1	999	
SIGNATURE	Signature, typed of printed name of registered agent a	and title if applicable. (NOTE: Re	gistered Ager	nt signature required v	when reinstating) DATE		<del></del>
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PSD	☐ DELETE	1.1 TITLE			Char	nge 🗀 Addition
NAME	DAOUST, PIERRE M		1.2 NAME				
STREET ADDRESS	8208 SARAGOZA COURT		13 STREET	TADDRESS			
CITY-ST-ZIP	ORLANDO FL 32836	_	1.4 CITY-\$	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Char	nge 🔲 Addition
NAME			2.2 NAME	1			
STREET ADDRESS			2.3 STREET	TADDRESS			
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Char	nge
NAME			3.2 NAME				•
STREET ADDRESS	·		3.3 STREET	T ADDRESS			
CITY-ST-ZIP	1		3.4. CITY-S	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Char	nge   Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Char	nge 🗌 Addition
NAME			5.2 NAME				
STREET ADDRESS		,	5.3 STREET	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	8.1 TITLE			Cha	nge 🔲 Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	TADDRESS			
OTTY OT 7/D			6.4 CITY-S	T-ZIP			

is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information use report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the with an address, with all other like empowered. I hereby certify that the information supplied with indicated on this annual report or supplemental a officer or director of the corporation or the receive Block 12 or Block 13 if changed, or on an attachm

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 28, 1999

CR2E034 (11/98)