PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000075454

1. Corporation Name

ASPEN CONSTRUCTION GROUP, INC.

Principal Place	of Business	Mailing Address					.,	.,		
3413 EVERETT AVENUE		3413 EVERETT AVENUE								
SPRING HILL FL 34609		SPRING HILL FL 34609				DO NOT WRITE IN TH	S SPA	CE		
						1	. Date Incorporated or Qualifed			
						".	08/29/1997			
2. Principal Pl	ace of Business	2a. Mailing Address	Mailing Address			4.	. FEI Number		Ar	pplied For
21	acc of Econoccc	— ·	26				59-3464957		No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				1_				Additional
		27	27			5. Certificate of Status Desired Fee Required				
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cour	ntry		8.	. This corporation owes the current year			
24	25		30			1	Personal Property Tax.	X Y		□No
	9. Name and Address of Curren	t Registered Agent		04	Name	10.	. Name and Address of New Registere	d Agen	<u> </u>	
DIEN	IES, WILLIAM J			81	Name					
3413 EVERETT AVENUE				82 Street Add			P.O. Box Number is Not Acceptable)			
	NG HILL FL 34609									
OI III	ING THEE TE STOOS			83						Ì
			-	84 City			F	85	Zip	Code
									ging its	societored
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was at	ithorized	by tr	he corporation	n's b	on submits this statement for the purpose loard of directors. I hereby accept the app	ointmer	nt as re	egistered
SIGNATURE							reinstating) DATE			
12.	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	13.	Agent :	signature required		ADDITIONS/CHANGES TO OFFICERS	AND DI	RECTO	ORS IN 12
TITLE	DPST	□ DELETE	1.1 मा	E			7.00		Change	☐ Addition
NAME	DIENES, WILLIAM J	_	1.2 NA							
STREET ADDRESS	3413 EVERETT AVENUE			1.3 STREET ADDRESS						
	ODDING LINE CLASSO			1.4 CITY-ST-ZIP						
CITY-ST-ZIP TITLE			_	2.1 TITLE					Change	☐ Addition
NAME				2.2 NAME]
STREET ADDRESS					ADDRESS					1
1			2.401				-		•	-
CITY-ST-ZIP TITLE		☐ DELETE	3 1 TITI						Change	Addition
NAME			3.2 NA	ME						
STREET ADDRESS					ADDRESS					l
CITY-ST-ZIP			3.4. CIT							į.
TITLE		☐ DELETE	4.1 TITI		. 				Change	☐ Addition
NAME			4. 2 NA	ME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			4.4 CIT				-			1
TITLE		☐ DELETE	5.1 TITI						Change	Addition
NAME			5.2 NA		1					}
STREET ADDRESS			5.3 STF	REETA	ADORESS					
CITY-ST-ZIP			5.4 CIT	Y-ST-	ZIP					
TITLE		☐ DELETE	6.1 TIT	LE					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 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

* 3-10-99

FILED

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90179 016 ***150.00