


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

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AND
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99 FEB 15 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>PA1000084557</u>					
1. Corporation Name RMP CONSTRUCTORS, INC.					
Principal Place of Business 716 VASSAR ST. ORLANDO, FL 32804			Mailing Address P.O. Box 547356 ORLANDO, FL 32854		
2. Principal Place of Business 21 716 VASSAR ST. Suite, Apt. #, etc. 22 City & State 23 ORLANDO, FL Zip 24 32804 Country 25 USA			2a. Mailing Address 26 P.O. Box 547356 Suite, Apt. #, etc. 27 City & State 28 ORLANDO, FL Zip 29 32854 Country 30 USA		
9. Name and Address of Current Registered Agent ROBERT M. BONDY 716 VASSAR ST. ORLANDO, FL 32804					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE <u>[Signature]</u> (NOTE: Registered Agent signature required when re-appointing)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
SEPT 97

4. FEI Number
59-3523916

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

DATE **2/11/99**

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******158.75 ****158.75**

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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 in an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] V.P. **2/11/99 (407) 835-1300**

CR2E034 (11/98)