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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29, 1999 8:00am

**Secretary of State** 

01-29-1999 90062 016 \*\*\*150.00

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000085934

1. Corporation Name

H&TS	STRUCTURAL SERVICES, IN	IC.					
					I 120111001 1101 11011 11001 11001 11011 11011 11011 11011 11011 11011 11011 11011 11011 11011 11011 11011 110	18181 BIHA 1818	. <b>B.</b> 1840 ( <b>B</b> 180 ( BB)
<u> </u>							
Principal Pla	ce of Business	Mailing Address			# 1900/1001 140 10114 10314 10314 00114 06114 00	INITE BULLO LALA	8 1671 <b>8681 6881</b>
4141 HONEYS	LICKLE CIR	4141 HONEYSUCKLE CIR					
MIDDLEBURG FL 32068 MIDDLEBURG FL 32068							
US , and the US					DO NOT WRITE IN THIS SPACE		
1					3. Date Incorporated or Qualifed		
	·				10/03/1997		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For
21 26					59-3471550	N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	Additional
22 27				رجہ ہے ہے	5. Certificate of Status Desired	Fee R	equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 , 28					Trust Fund Contribution		to Fees
Zip Country Zip			Country		8. This corporation owes the current year Int	angible	
24	25		30		Personal Property Tax.	∐Yes	⊠No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	Agent	
<u>.</u>			81	1 Name			
, , , CARKHUFF, TERRY			80 04		description of the second of t		
4141 HONEYSUCKLE CIR			64	82 Street Address (P.O. Box Number is Not Acceptable)			ļ
MIDDLEBURG FL 32068			83	3			
						1	
	•		84	4 City	EI.	85 Zip	Code
44 Director	t to the provisions of Sections 507 050	12 and 607 1509. Elorida Statutor	. *ha ahai		FL		
office or agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was aut ations of, Section 607.0505, Florid	horized by da Statute	the corporat s.	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoint	ntment as re	gistered
SIGNATURE							
12.	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R ND DIRECTORS	_	ent signature requir	ed when reinstating) DATE		
TITLE	PVP	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	☐ Change	ORS IN 12 Addition
		( Deterie		1	, , , , , ,	□ Change	☐ Addition
NAME	CARKHUFF, HOWARD T		1.2 NAME			•	
STREET ADDRESS	THE RESERVE OF THE PROPERTY OF		1.3 STREE	T ADDRESS			
CITY-ST-ZIP			1.4 CITY-5	ST-ZIP			
TITLE	ST	☐ DELETE 2.1 T				Change	☐ Addition
NAME	**************************************		2.2 NAME	1			
STREET ADDRESS	***************************************		2.3 STREET ADDRESS				
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TITLE		DELETE 3.1				☐ Change	☐ Addition
NAME		321					ļ
STREET ADDRESS	DORESS		3.3 STREET ADDRESS				
CITY-ST-ZIP	33		3.4. CITY-5	ST-ZIP		11	
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME	,		4. 2 NAME				
STREET ADDRESS	TADDRESS 4.3 S		4.3 STREET ADDRESS				J
CITY-ST-ZIP							ŀ
TITLE			4.4 CITY-S	31-ZIP	* ***	[ Change	Addition
	· ·		5.1 TITLE 5.2 NAME			Change	☐ ¥ddisou
NAME .							
STREET ADDRESS	Section 2			T ADDRESS			
CITY-ST-ZIP		<del></del>	5.4 CITY-S	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE			6.1 TITLE	1		Change	☐ Addition
NAME	'		6.2 NAME				
STREET ADDRESS	CONTROL FOR		6.3 STREET	TADDRESS			

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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 any address, with all other like empowered.

SIGNATURE: