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Secretary of State

04-15-1999 90077 021 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000009250			
1. Corporation Name BUILDERS OF M.E.C.A. INC			
Principal Place of Business 1301 12TH AVENUE SOUTH LAKE WORTH FL 33460		Mailing Address 1301 12TH AVENUE SOUTH LAKE WORTH FL 33460 65-0828527	
2. Principal Place of Business 21 1649 Wingfield St. Suite, Apt. #, etc.		2a. Mailing Address 2a 1301 12th Ave. S. Suite, Apt. #, etc.	
23 LAKE WORTH FL City & State of		23 LAKE WORTH, FL City & State of	
24 33460 Zip Country PR		24 33460 Zip Country PR	
9. Name and Address of Current Registered Agent LOWE, RETHA 1301 12TH AVENUE SOUTH LAKE WORTH FL 33460		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 FL		85 Zip Code	
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 Retha Lowe - Adm. DATE 2-1-99			
(NOTE: Registered Agent signature required when registering)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE Director ☐ DELETE		1.1 TITLE President ☐ Change ☐ Addition	
NAME RAYMOND SWEET		1.2 NAME 101 So 5 St.	
STREET ADDRESS 101 So 5 Street		1.3 STREET ADDRESS Lake Worth, FL 33460	
CITY-ST-ZIP LAKE WORTH, FL 33460		1.4 CITY-ST-ZIP Lake Worth, FL 33460	
TITLE Officer ☐ DELETE		2.1 TITLE Vice President ☐ Change ☐ Addition	
NAME RETHA LOWE		2.2 NAME 1301 12th Ave S	
STREET ADDRESS 1301 12th Ave S		2.3 STREET ADDRESS Lake Worth, FL 33460	
CITY-ST-ZIP LAKE WORTH FL 33460		2.4 CITY-ST-ZIP Lake Worth, FL 33460	
TITLE Officer ☐ DELETE		3.1 TITLE 2nd Vice President ☐ Change ☐ Addition	
NAME Brenda Baker		3.2 NAME 1801 So. B St.	
STREET ADDRESS 1301 So B Street		3.3 STREET ADDRESS Lake Worth, FL 33460	
CITY-ST-ZIP LAKE WORTH FL 33460		3.4 CITY-ST-ZIP Lake Worth, FL 33460	
TITLE Officer ☐ DELETE		4.1 TITLE Sec ☐ Change ☒ Addition	
NAME Teresa Smith		4.2 NAME Teresa Smith	
STREET ADDRESS 1617 W. Ave		4.3 STREET ADDRESS Boynton Ave, FL 33435	
CITY-ST-ZIP Boynton Beach, FL 33435		4.4 CITY-ST-ZIP Boynton Beach, FL 33435	
TITLE Director ☐ DELETE		5.1 TITLE Asst. Secy. ☐ Change ☐ Addition	
NAME Beverly Jordan		5.2 NAME 633 Washington Ave	
STREET ADDRESS 633 Washington Ave		5.3 STREET ADDRESS Lake Worth, FL 33460	
CITY-ST-ZIP Lake Worth FL 33460		5.4 CITY-ST-ZIP Lake Worth, FL 33460	
TITLE ☐ DELETE		6.1 TITLE ☐ Change ☐ Addition	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (11/98)