

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 17, 1999 8:00 am  
Secretary of State

05-17-1999 90076 042 \*\*\*150.00

DOCUMENT # P98000039274

1. Corporation Name

G & H LATHING & STUCCO INC.

Principal Place of Business

1732 RAVENALL AVE.  
ORLANDO FL 32811

Mailing Address

1732 RAVENALL AVE.  
ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/29/1998

4. FEI Number

59-3508483

Applied For

Not Applicable

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

2. Principal Place of Business

21 4215 Arch CT

Suite, Apt. #, etc.

2a. Mailing Address

26 4615 Arch CT

Suite, Apt. #, etc.

City & State

23 Orlando FL

City & State

28 Orlando FL

Zip

24 32808 25

Country

Zip

29 32808 30

Country

9. Name and Address of Current Registered Agent

GRANT, BRYAN

1732 RAVENALL AVE.

ORLANDO FL 32811

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4615 Arch CT

83

84 City

Orlando

FL

85 Zip Code

32808

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME GRANT, BRYAN

STREET ADDRESS 1732 RAVENALL AVE.

CITY-ST-ZIP ORLANDO FL 32811

TITLE DVP ☐ DELETE

NAME HARVEY, KEVIN

STREET ADDRESS 4731 CASON COVE APT. 1308

CITY-ST-ZIP ORLANDO FL 32811

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

4615 Arch CT

Orlando FL 32808

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

7096 Scrub Oak Lane

Orlando FL 32818

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Bryan Grant - Bryan Grant

Date

Daytime Phone #

4/22/99

407-521-2151

CR2E034 (11/98)

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