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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED May 27, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State

3. Date Incorporated or Qualifed

06/22/1998

4. FEI Number

05-27-1999 90008 006 ***150.00

=∷::...

--:-

=::=:

■#

≡::

Applied For

\$8.75 Additional

Not Applicable



DOCUMENT #	P98000056529
Corporation Name	

STRAUGHN CONSTRUCTION, INC.

Principal Place of Business 701 NO. 69TH TERR. HOLLYWOOD FL 33024

21

2. Principal Place of Business

Mailing Address

701 NO. 69TH TERR. HOLLYWOOD FL 33024

2a. Mailing Address

26

DO NOT WRITE IN THIS SPACE

Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A	I			
22		27				Fee Re	<u></u>		
City & State	9	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	-			
Zip	Country	Zip			8. This corporation owes the current	year Intangible			
24	25	29 30	ı — ,		Personal Property Tax.		₩.vo		
					10. Name and Address of New Regi	stered Agent			
			81	Name					
STRAUGHN, JESSIE L			9	Stroot Add	trace (B.O. Box Number is Not Acceptable	· · · · · · · · · · · · · · · · · · ·			
701 NO. 69TH TERR.			04	82 Street Address (P.O. Box Number is Not Acceptable)					
HOLLYWOOD FL 33024			83	3					
						85 Zip C	~		
			84	1		FL			
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 produce if applicable. (NOTE, Registered Agent signature required when reinstating) DATE									
12.	Signature, typed or printed name of registered agent an OFFICERS AND	<u> </u>	13.	sit signature regar	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12		
TITLE	D OFFICERS AND	□ DELETE	1.1 TITLE		NDB (1.0.10.70)	☐ Change	ORS IN 12 Addition		
NAME	STRAUGHN, JESSIE L	_	1.2 NAME				3		
STREET ADDRESS	701 NO. 69TH TERR.		1.3 STREET ADDRESS				6		
}	HOLLYWOOD FL 33024		1.4 City-ST-ZIP				5		
CITY-ST-ZIP TITLE	D	DOELETE	2.1 TITLE			☐ Change	Addition		
NAME	STRAUGHN, JESSIE T	+ •	2 2 NAME				İ		
STREET ADDRESS	701 NO. 69TH TERR.		2 3 STREET ADDRESS						
	HOLLYWOOD FL 33024		2. 4 CITY-ST-ZIP						
CITY-ST-ZIP	D	DELETE	3.1 TITLE			Change	☐ Addition		
NAME	STRAUGHN, MARJORIE	Q.	32 NAME						
STREET ADDRESS	701 NO. 69TH TERR.		3.3 STREET ADDRESS						
1	HOLLYWOOD FL 33024		3.4. CITY-ST-ZIP				1		
CITY-ST-ZIP TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	4.1 TITLE			Change	☐ Addition		
NAME		_	4. 2 NAME				1		
STREET ADDRESS				ET ADORESS			ļ		
CITY-ST-ZIP			4.4 CITY-]		
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition		
NAME		_	5.2 NAME				}		
STREET ADDRESS			5.3 STRE	ET ADDRESS					
1			5.4 CITY-	ST-ZIP					
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS				İ		
			6.4 CITY-				1		
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for th			Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the i	nformation		

Indicated on this annual report or supplied with his filling does not qualify for the exemption stated in Section 1.19.07(3)(f), Florida Statutes. I further certify that the mornation 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:

अर्भ | 99