Feb 21, 1999 8:00 am Secretary of State

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

	1999		DIVISION OF CORPORATIONS			ĺ	02-21-1999 90038 009 ***150.00			
DOCL	JMENT # P	98000058	R871							
	ion Name CONSTRUCTION S		<i>,</i> 071							
DUAZ (CONSTRUCTION S	SERVICES, INC.					(1001) 001 110 (012) 10111 00111 00111 00111			
	•					-				
Principal Pla	ce of Business	Ма	iling Address		-			HT BRIBT BITHT TRIBE TO H		
7146 SPORTMANS DRIVE 7146 SPORTMANS DRIVE NORTH LAUDERDALE FL 33068 NORTH LAUDERDALE FL 33068								•		
NORTH LAUDE	ENDALE FL 33066	NOR	TH LAUDERDALE FL 330)68			DO NOT WRITE II	N THIS SPACE		
							3. Date Incorporated or Qualifed	THIS SPACE		
9 Dringing I	Diago of Division						07/02/1998			
2. Principal 8	Place of Business	2a.	Mailing Address			4	4. FEI Number 65-0848367		pplied For	
Suite, Apt	. #, etc.		Suite, Apt. #, etc.	-			65-007-007		lot Applicable Additional	
22	· · · · · · · · · · · · · · · · · · ·	27				5	5. Certifcate of Status Desired		Additional lequired	
City & Sta	ıte	28	City & State			6	5. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country Zip			Country 8. This of			3. This corporation owes the current y		to rees	
24	25 25	29	3	<u>ol</u>			Personal Property Tax.	☐ Yes	□No	
9. Name and Address of Current Registered Agent 81 Name 1.4.4							Name and Address of New Regis	7		
AMERILAWYER							dred M. Escalan	te		
1 1 1167 6						ddress (S	(P.O. Box Number is Not Acceptable)	IT IN CHIT CON THE	八色。 撰印 5	
CORAL GABLES FL 33134							M. T. H. P. SEP ST. COMP.	33,85,4,90,85	3.31.71	
-				84	City 1\	ath.	The state of the same against	2 (17) (2 (18) (19) (19) (19) (19) (19) (19) (19) (19	Code	
11. Pursuant	to the provisions of Sec	tions 607.0502 and 607	.1508. Florida Statutes	the above	named cor	rnoratio	Lauderdale	FL 33	8008	
office or a agent. I a	registered agent, or both im familiar with, and acc	i, in the State of Florida ept the obligations of, S	Such change was auth ection 607.0505, Florid	norized by t a Statutes.	he corporat	ation's b	on submits this statement for the purpoper of directors. I hereby accept the	appointment as re	gistered	
SIGNATURE		e of registered agent and title if a	- HILDRED	egistered Agent	Escal.	ant	c-fresident Ja	18/99		
12.		FFICERS AND DIREC	· · · · · · · · · · · · · · · · · · ·	13.	signature requi		ADDITIONS/CHANGES TO OFFICE	NE AND DIDECTO	NDC 184 40	
TITLE	PTD		☐ DELETE	1.1 TITLE			ADDITIONS/CHANGES TO OFFICE	Change	Addition	
NAME	ESCALANTE, MILDI	red M		1.2 NAME						
STREET ADDRESS	7146 SPORTMANS			1.3 STREET	NODRESS					
CITY-ST-ZIP	NORTH LAUDERDA	LE FL 33068		1.4 CITY-ST-	ZIP				ļ	
TITLE			☐ DELETE	2.1 TITLE		÷		☐ Change	☐ Addition	
NAME	GANN, RICHARD SI			2.2 NAME						
STREET ADDRESS	7146 SPORTMANS			2.3 STREET	DDRESS					
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068		2. 4 CITY-ST	ZIP		ہ ہے۔ ان انتخاب ان انتخاب ان انتخاب ان انتخاب ا				
TITLE			☐ DELETE	3.1 TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS				3.2 NAME						
STREET ADDRESS				3.3 STREET A				,		
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-ST- 4.1 TITLE	ZIP					
NAME			Dece iz					☐ Change	Addition ∫	
STREET ADDRESS				4.2 NAME 4.3 STREET A	DDDEED			•	ţ	
CITY-ST-ZIP									Ì	
TITLE			☐ DELETE	4.4 CITY-ST-	LIF		·	Change	Addition	
NAME				5.2 NAME					C) Vacaboti	
STREET ADDRESS				5.3 STREET A	DORESS		•			
CITY-ST-ZIP				5.4 CITY-ST-2	ZIP					
TITLE	· · · · · · · · · · · · · · · · · · ·		☐ DELETE	6.1 TITLE				Change	Addition	
NAME				6.2 NAME	ı			_ •		

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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

- HILDOH. ESCALANTE

954-724-3291