

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90004 012 ***558.75

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DOCUMENT # **P98000063965**

Corporation Name

#253 RESTORATION PROJECT, INC.



Principal Place of Business

**4920 SW 167TH AVENUE
FT. LAUDERDALE FL 33331**

Mailing Address

**4920 SW 167TH AVENUE
FT. LAUDERDALE FL 33331**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HELLER CAPITAL, INC.
308 NW 101 TERRACE
CORAL SPRINGS FL 33071**

81 Name

82 Street Address (Post Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

GNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

DO ☐ DELETE
BATES, ROBERT (PRESIDENT)
4920 SW 167TH AVENUE
FT. LAUDERDALE FL 33331

1.1 TITLE **EXECUTIVE DIRECTOR** ☐ Change ☒ Addition
1.2 NAME **ALLEN C. HARPER**
1.3 STREET ADDRESS **1360 SOUTH DIXIE HWY.**
1.4 CITY-ST-ZIP **CORAL GABLES, FL. 33146**

DO ☐ DELETE
SPRECKELMEIER, STEVE (VICE-PRES. GEN. MANAGER)
4920 SW 167TH AVENUE
FT. LAUDERDALE FL 33331

2.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
2.2 NAME **ALFRED G. ROBINCHAU**
2.3 STREET ADDRESS **401 BRINY AVE. #402**
2.4 CITY-ST-ZIP **POMPANO BEACH, FL. 33062**

DO ☐ DELETE
SPRECKELMEIER, REBECCA (SECRETARY TREASURER)
4920 SW 167TH AVENUE
FT. LAUDERDALE FL 33331

3.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
3.2 NAME **EDWARD D. ARCHER**
3.3 STREET ADDRESS **7383 HIGH RIDGE RD.**
3.4 CITY-ST-ZIP **LANTANA, FL. 33462**

☐ DELETE

4.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
4.2 NAME **JOHN BOOTS**
4.3 STREET ADDRESS **3900 N.W. 43RD ST.**
4.4 CITY-ST-ZIP **COCONUT CREEK, FL. 33073**

☐ DELETE

5.1 TITLE **DIRECTOR** ☐ Change ☒ Addition
5.2 NAME **MICHAEL BURNS**
5.3 STREET ADDRESS **4940 HAWKE'S BLUFF**
5.4 CITY-ST-ZIP **DAVIE, FL. 33331**

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE: **Steve Spreckelmeier** **8-30-99** **680-7686**

CR2E034 (5/99)