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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 P9800078570

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90040 030 ***150.00

1. Corporation	n name					ì		
S&RC	ARPENTRY INC.					((88) 188) 188 (1810 (88) (1810) 188) 188) 188) 188) 188)	Dece (1886) (8 16) 8 1111) 44 () 44 () (51 ()
Principal Place of Business Mailing Address						-	Ailt Ineni istel eilli	[
11232 S.W. 67TH TERRACE 11232 S.W. 67TH TERRACE MIAMI FL 33173 MIAMI FL 33173						DO NOT WRITE IN T	HIS SPACE	,
						3. Date Incorporated or Qualifed	THO OF ACE	_
						09/10/1998		
Principal Place of Business 2a. Mailing Address						4, FEI Number	A	oplied For
21 26					_	65-0860880		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired		Additional equired
City & State City & State						6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Coun	itry		8. This corporation owes the current year		n.,
24	25		30		_	Personal Property Tax. 10. Name and Address of New Register	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Register	an Waur	
ANSCHUTZ, ROBERTO						(D.O. Bay Number is Not Assentable)		
11232 S.W. 67TH TERRACE				82	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33173				83		·		ļ
				84	City		FL 85 Zip	Code
11, Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the ab	ove-r	named corpo	oration submits this statement for the purposi	e of changing its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	ithorized	by th	ne corporation	n's board of directors. I hereby accept the ap	pointment as re	egistered
SIGNATURE	Signature, typed or printed name of registered age	and title if continoble (MOTE)	Registered 6	Soont e	handure required	when reinstating) DATE		{
12.		ID DIRECTORS	13.	·gc···· ·	Ag-741410 70441701	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE			-	1.1 TITLE			Change	☐ Addition
NAME	ANSCHUTZ, ROBERTO L		1.2 NAM	ΜE				}
STREET ADDRESS	- · · · · · · · · · · · · · · · · · · ·		1.3 STR	REETA	DORESS			ĺ
CITY-ST-ZIP	4 4 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		1.4 CIT	1.4 CITY-ST-ZIP				
TITLE	VSTD	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	•		2.2 NAM	2.2 NAME			•	
STREET ADDRESS			2.3 STF	REETA	DORESS			ļ
CITY-ST-ZIP			2. 4 CIT	Y-ST-	ZIP	<u> </u>		
TITLE	☐ DELETE 3.1		3.1 TITL	3.1 TITLE			Change	Addition
NAME			3.2 NAM	ME				
STREET ADDRESS			3.3 STF	REETA	DORESS			Ì
CITY-ST-ZIP			3.4. CIT	Y-ST-	ZIP	<u> </u>	□ Character	- Addition
TITLE		☐ DELETE	4.1 TITL	Æ			Change	Addition
NAME			4. 2 NA					Ì
STREET ADDRESS					DDRESS			ì
CITY-ST-ZIP		Operete	4.4 CIT		ZIP		☐ Change	Addition
TITLE		☐ DELETE	5.1 TITL 5.2 NAM				change	Addition
NAME					DORESS			į
STREET ADDRESS	İ		5.4 CIT					İ
CITY-ST-ZIP	5.4 DELETE 6.1						☐ Change	☐ Addition
TITLE			6.2 NA					_
NAME					DORESS			[
STREET ADDRESS			3331	-LC : A				

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 TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-99

EVENINC 305)274 401

3R2E034 (11/98)