

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

page 1

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 MAR 17 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **546184**
1. Corporation Name

CONSTRUCTOR'S COMPANY INTERNATIONAL, INC
dba FCC

Principal Place of Business

Mailing Address

16525 Forestlake Dr
Tampa, FL
33624

2. Principal Place of Business

2a. Mailing Address

21 16525 Forestlake Dr.

26 -

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 TAMPA, FL

Zip

Zip

24 33624

Country

Country

25 Hillsborough

9. Name and Address of Current Registered Agent

Michael A. Christy
16525 Forestlake Dr.
Tampa, FL
33624

61 Name

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

63

64 City

3. Date Incorporated or Qualified

3a. Date of Last Report

4/18/91

7-19-95

4. FET Number

Applied For
Not Applicable

593102894

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 has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

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

(If not registered agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PRESIDENT, V.P., SEC. - TREASURER** DELETE

NAME **Michael A. Christy**
STREET ADDRESS **16525 Forestlake Dr.**
CITY-ST-ZIP **Tampa, FL 33624**

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

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do 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 addendum with an address.

SIGNATURE: **Michael A. Christy**

CR2E034 (9/96)

FILED
97 MAR 17 PM 1:11
FROM THE DESK OF **MICHAEL CHRISTY**
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

paged 2

TO WHOM IT MAY CONCERN:

Pursuant to my conversations with Ms. Sellers and Ms. Brumbley I request a waiver of reinstatement fees. I did not receive my annual paperwork from the State of Florida, but henceforth will be sure to pay the Corporate fees on a timely basis. On 3/6/97 Ms. Brumbley said to mail a check for 373⁷⁵ to be current through January 1998. Therefore, I am enclosing a check in that amount.

Sincerely,

Michael A. Christy

3/17/97
(X)