## 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

## DOCUMENT # S75327 1. Corporation Name

CASABLANCA CONSTRUCTION, INC.

Principal Place	e of Business	Mailing Addre	SS						
1761 GLADIOLA	S DR	P. O. BOX 249	8						
SUITE A		N2				DO NOT WRITE IN THIS SPACE			
WINTER PARK I	FL 32792-6224	GOLDENROU I	GOLDENROD FL 32733-2498			3. Date Incorporated or Qualifed			
US		00				08/19/1991			}
2 Principal Pl	lace of Business	2a. Mailing Ad	Idress		<del></del>	4. FEI Number	· ·	Appli	ed For
<b>─</b> ┐ '	iace of business	<del>-</del>	26			59-3085619		1	Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.				\$8.		ditional
22	<i>"</i> , 0.0.	<b>├</b>	27)			5. Certifcate of Status Desired	□ Fe	e Requ	ired
City & State			City & State			6. Election Campaign Financing	\$5	.00 м	av Be
23		28	28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip				8. This corporation owes the curr	ent year Intangible		Ì
24	4 25 29		30			Personal Property Tax. Yes No			
	9. Name and Address o	of Current Registered Age	nt			10. Name and Address of New I	Registered Agent		
) 4F-4 . a				81	Name				
	ASQUEZ, SILVIO		82 Stro			ddress (P.O. Box Number is Not Accept	able)		
	GLADIOLAS DR								
WIN	TER PARK FL 32792								
				84	City		FL 85	Zip Co	de
		607 0500 and 607 4500 E	orida Statutas, th	o abou	namod o	orporation submits this statement for the		na its re	gistered
office or r	to the provisions of Sections registered agent, or both, in the im familiar with, and accept the	he State of Florida, Such Ch	ande was authori	zea ov	the corpor	ation's board of directors. I hereby acce	pt the appointment	as regis	stered
SIGNATURE			DIOTE: Bount	arad Ace	t signature rec	uired when reinstating)	DATE		
12.	Signature, typed or printed name of reg	DERS AND DIRECTORS		13.	it signature req	ADDITIONS/CHANGES TO OF		CTOR	S IN 12
TITLE	PVTS		☐ DELETE 1.1T				Cha		Addition
NAME	VELASQUEZ, SILVIO		1	2 NAME					
STREET ADDRESS	4-44 OL 40101 40 DD		1,	3 STREE	ADDRESS				
CITY-ST-ZIP	WINTER PARK FL			.4 CITY-S					
TITLE				1 TITLE	· · · · ·		☐ Cha	inge	Addition
NAME	,		2	2 NAME					
STREET ADDRESS			2	.3 STREE	ADDRESS				
CITY-ST-ZIP			2	. 4 CITY-5	T-ZIP				
TITLE			DELETE 3	.1 TITLE			☐ Cha	ange	☐ Addition
NAME			3	.2 NAME					
STREET ADDRESS			3	.3 STREE	T ADDRESS				Ì
CITY-ST-ZIP		_	3	4. C(TY- 8	T-ZIP				
TITLE			DELETE 4	.1 TITLE			☐ Cha	ange	Addition
NAME			4	. 2 NAME					ĺ
STREET ADDRESS			4	.3 STREE	ADDRESS				ļ
CITY-ST-ZIP				4 CITY- S	T-ZIP				774 (88
TITLE				.1 TITLE			☐ Cha	ange	Addition
NAME				.2 NAME					ļ
STREET ADDRESS	1				FADORESS				
CITY-ST-ZIP				4 CITY-S	T-ZIP				
TITLE			,	.1 TITLE	}		Ch:	ange	☐ Addition
NAME			. 6	.2 NAME					Ì
					TADDRESS				

14. 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 appress, with all other like empowered.

**FILED** 

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90084 005 \*\*\*150.00