## 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 # **S76373**

1. Corporation Name

MCCONACHIE CONSTRUCTION COMPANY, INC.

Principal	Place	of	Business

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90257 013 \*\*\*158.75



Principal Place o	of Business	Mailing Address				1 19811910 10010 01100 1111 11000 1111 0101		
1432 S.W. 104 A Miami FL 33176	VENUE	11432 S.W. 104 AVENUE MIAMI FL 33176				DO NOT WRITE IN TH	IS SPAC	F
						Date Incorporated or Qualifed		<u>-</u>
					J 3.			
					+.	08/28/1991		Assiss Co.
<ol><li>Principal Place</li></ol>	ce of Business	2a. Mailing Address			4.	FEI Number	-	Applied For
1		26				65-0286763		Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired		.75 Additional ee Required
City & State		City & State			6.	Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees
Zip	Country	Zip	Country		R	This corporation owes the current year	Intangible	•
<u>a</u> ] ′	25	29 30			•	Personal Property Tax.	☐ Ye	
	9. Name and Address of Curr	rent Registered Agent			10.	Name and Address of New Registere	d Agent	
	NACHIE, RICHARD L.		81 82	Name Street Addre	ess (F	P.O. Box Number is Not Acceptable)		
	S.W. 104 AVENUE							
MIAMI	FL 33176		83					
			84	City		F	L 85	Zip Code
office or rea	istered agent or both in the Sta	0502 and 607.1508, Florida Statutes, ate of Florida. Such change was autho igations of, Section 607.0505, Florida	orized by 1	the corporatio	oration on's bo	n submits this statement for the purpose pard of directors. I hereby accept the app	of changi ointment	ng its registered as registered
SIGNATURE	_							

SIGNATURE			required when reinstalling) DATE				
Signature, types of printed name of registered agent and use it applicable.							
12.	OFFICERS AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	-	1.2 NAME					
NAME	MCCONACHIE, RICHARD L.						
STREET ADDRESS	11432 S.W. 104 AVE.	1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE	ST DELETE	2.1 TITLE	Charge C Addition				
NAME	MCCONACHIE, RICHARD L.	2.2 NAME					
STREET ADDRESS	11432 S.W. 104 AVE.	2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP					
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition				
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3.4. CITY-ST-ZIP					
TIME	☐ DELETE	41 TITLE	☐ Change ☐ Addition				
NAME		4 2 NAME					
STREET ADDRESS		4 3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition				
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					
CITY+ST-ZIP		6.4 CITY+ST-ZIP					

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:

Pular J. M. Graulis 'STANGER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR