FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

S81799 **DOCUMENT #**

(6)

GRANDMARK BUILDING & RESTORATION, INC.

Principal Place of Business

Mailing Address



3892 PROSPECT AVE. W. Palm BCH. Fl 33404		3892 PROSPE W. Palm BCH					
					3. Date Incorporated or Qualified 09/20/1991	3a. Date of Lat 06/14/	
2. Principal F	Place of Business	2a. Mailing Add	ress		4. FEI Number	Ĺ	Applied For
21		26		*	65-0422437		Not Applicable
Suite, Apt. #, etc 22		Suite, Apt. F	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta	ite	City & State	City & State 8		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zγρ	Country Zip			untry	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30	т		i □No	
	9. Name and Address of C	Current Registered Agent		l al M	10. Name and Address of New I	Registered Agent	
_	•			81 Name			
TAYLOR, J.E., NI				82 Street Address (P.O. Box Number is Not Acceptable)			
	ROSPECT AVENUE						
#7				83			
W. PAL	M BCH. FL 33404			84 City		85	Zip Code
				<u> </u>	orporation submits this statement for the pu	FL	<u> </u>
familiar v SiGNATURE	with, and accept the obligations of	f, Section 607 0505, Florida	Statutes.		board of directors. Thereby accept the app	DATE	and the gradient states
12.	OF FICE F	RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF		
TITLE	D	□ D€	LETE 11	TITLE	Director	☐ Cha	nge 💢 Addition
NAME	TAYLOR, J.E., III		121	IAME	Frank & O'COMNON		
STREET ADORESS			1.3 \$	TREET ADORESS	16 GRAND BAY Cr.		
CITY-ST-ZIP	PALM BEACH GRONS F			OTY-ST-ZIP	Juno Bence, PI	33409	
TITLE	D	≥ OE		TITLE	,	Cha	nge 🔲 Addition
NAME	O'CONNOR, TONI V.	-	221	AME			
SPHEET ADDRESS			235	FREET ADDRESS			
CITY-ST-ZIP	JUNO BCH FL	,,		117 - ST - ZIP			
TITLE		☐ DE		==		☐ Cha	nge 🔲 Addition
NAME				AME			
STREET ADDRESS	S			SPREEL ADDRESS			
CITY-S1-ZIP				ITY - ST - ZIP			ons / Addition
TITLE		□ D€		TITLE		☐ Cha	nge 🔲 Addition
NAME	1			IAME			
STREET ADORESS	S			STREE! ADDRESS			
CITY-ST-ZIP		[] DI		DHY+SI-ZIP		☐ Cha	nge 🔲 Addition
THLE		☐ D£		Til: E		Ĺ Cua	nge [] Addition
NAME				IAME			
STREET ADDRESS	S			STREET ADDRESS			
CITY-ST-ZIP				CITY+ST+ZIP Title			rge Addition
TITLE				VAME	8000018 -05/15/9601	<u> </u>	95 🔲 1930000
NAME expect appropri					***600.00	U30***UZ3	
STREET ADDRESS	5			STREET ADDRESS	***************************************		
CITY-ST-ZIP	1		■ 643	DITY - ST-ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, over an attachment of the an address.

E SIGNING OFFICEN OR DIRECTOR

SIGNATURE:

4/24/96 (40) 863-7349