May 08, 1999 8:00 am Secretary of State

05-08-1999 90021 046 ***150.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V37648**

1. Corporation Name

Principal Place of Business

FRANK C HUNTER, GENERAL CONTRACTOR, INC.

| 731 NE 47TH C | | | 31 NE 47TH CT. | | | ļ | | | | | |
|------------------------|---|----------------------------|------------------------------|---------------------------|-------------------|---|--|-----------------|--------------|------------|--|
| OAKLAND PARK US | 1 FL 33334 | US US | OAKLAND PARK FL 33334 LIS | | | | DO NOT WRITE IN THIS SPACE | | | | |
| 03 | | 00 | | | | | Date Incorporated or Qualifed 05/18/1992 | | | | |
| 2 Principal Pl | ace of Business | 2a. Mailing A | ddress | | | | FEI Number | | App | lied For | |
| 21 | 400 or 200000 | — <u> </u> | 26 | | | | 65-0333870 | | Not | Applicable | |
| Suite, Apt. | #, etc. | Suite, Ap | Suite, Apt. #, etc. | | | 5. | Certifcate of Status Desired | | \$8.75 Ac | | |
| City & State | <u> </u> | | City & State | | | 6 | Election Campaign Financing | | \$5.00 N | Jay Re | |
| 23 | | 28 | 28 | | | Trust Fund Contribution Added to Fees | | | | | |
| Zip | | | | Country | | 8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☐ No | | | | | |
| 24 | 25 29 30 9. Name and Address of Current Registered Agent | | | | | | Personal Property Tax. | | | NO | |
| | 81 | | 10. | Name and Address of New F | registered Ag | ent | - | | | | |
| HINTED PRANK C | | | | | Name | | | | | | |
| | TER, FRANK C. NE 47TH CT. | | 82 Street Ad | | | ddress (P.O. Box Number is Not Acceptable) | | | | | |
| OAKI | LAND PARK FL 33334 | | | | | | | | | _ | |
| | | | | 84 | , | | | FLI | 85 Zip C | | |
| 11 Pursuant | to the provisions of Sections (| 607,0502 and 607,1508, F | lorida Statutes, | the above | e-named co | orporation | submits this statement for the ard of directors. I hereby acce | purpose of ch | anging its r | egistered | |
| office or re | egistered agent, or both, in th | e State of Florida. Such c | hange was autho | orized by | the corpora | ation's boa | ard of directors. I hereby accep | pt the appointn | nent as reg | istered | |
| agent. I ai | m familiar with, and accept th | e obligations of Section | 00 a305, Fiorida | Tea | | 1/ | / - | 4-3 | o - 99 | 2 | |
| SIGNATURE | Signature, typed or printed name of regis | u can | /NOTE: Boo | rictored Agor | nt signature requ | KAR | instatura) | DATE | | 1 | |
| | | ERS AND DIRECTORS | (NOTE: Nog | 13. | n anginatore raqu | | DDITIONS/CHANGES TO OF | FICERS AND | DIRECTOR | RS IN 12 | |
| 12. | | | | 1.1 TITLE | | | BBITTOTOTOTOTOTO TO OF | | Change | Addition | |
| TITLE | HUNTER, FRANK C. | 1.2 NA | | | | | | _ | _ • | | |
| NAME STREET ADDRESS | | | | | T ADDRESS | | | | | | |
| CITY-ST-ZIP | ANZIANO DADZIEL | | | 1.4 CITY-S | | | | | | | |
| TITLE | | | | 2.1 TITLE | | | | | Change | ☐ Addition | |
| NAME - | | | | 2.2 NAME | | | | | | - | |
| 1 | L | | | 2.3 STREE | TADORESS | | | | | | |
| STREET ADDRESS | | | | 2.4 CITY-5 | ľ | | | | | | |
| CITY-ST-ZIP | | | DELETE | 3.1 TITLE |) I - ZIF | | | | Change | Addition | |
| TITLE | | | | 32 NAME | | | | | - | _ | |
| NAME STREET ADDRESS | | | | 3.3 STREE | T ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 3.4. CITY-5 | ST-ZIP | | | | | | |
| TITLE | | |] DELETE | 4.1 TITLE | | | | [| Change | ☐ Addition | |
| NAME | | | | 4. 2 NAME | - | | | | | | |
| STREET ADDRESS | | | | 4.3 STREE | TADORESS | | | | | - | |
| CITY-ST-ZIP | | | | 4.4 CITY-S | T-ZIP | | | | 70 | | |
| TITLE | | [| DELETE | 5.1 TITLE | | | | Ĺ | _] Change | ☐ Addition | |
| NAME | | | | 5.2 NAME | | | | | | | |
| STREET ADDRESS | | | | | TADORESS | | | | |) | |
| CITY-ST-ZIP_ | | | 7 | 5.4 CITY- S | 1-ZIP | | | г | Change | Addition | |
| TITLE | • | L | DELETE | 6.1 TITLE | | | | ι | Change | ☐ vaaidou | |
| NAME | | | | 6.2 NAME | [| | | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 6.4 CITY-S | T-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 a rother like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

التحريمة

Day 98 33

R2F034 (11/98)