

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

CORPORATION  
ANNUAL REPORT  
**1995**



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

**APPROVED  
AND  
FILED**

**95 APR 17 PM 1:34**

**DOCUMENT # K17175 (6)**

1. Corporation Name  
**ART GARCIA BUILDING CONTRACTOR, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**500 SUNDANCE TRAIL  
P O BOX 3613  
VERO BEACH FL 32964  
US**

Mailing Address  
**500 SUNDANCE TRAIL  
P O BOX 3613  
VERO BEACH FL 32964  
US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business  
21 **2855 OCEAN DRIVE**  
Suite, Apt. #, etc.  
22 **Suite C5**  
City & State  
23 **VERO BEACH FL.**  
Zip  
24 **32963** Country  
25 **INDIAN RIVER**

2a. Mailing Address  
26 **P.O. Box 3613**  
Suite, Apt. #, etc.  
27  
City & State  
28 **VERO BEACH FL.**  
Zip  
29 **32964** Country  
30 **INDIAN RIVER**

3. Date Incorporated or Qualified  
**03/07/1988**

3a. Date of Last Report  
**03/22/1994**

4. FEI Number  
**65-0032044** Applied For  
Not Applicable

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

9. Name and Address of Current Registered Agent  
**GARCIA, ARTURO L.  
500 SUNDANCE TRAIL  
VERO BEACH FL 32963**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE **D**

NAME **GARCIA, ARTURO L.**

STREET ADDRESS **500 SUNDANCE TRAIL**

CITY - ST - ZIP **VERO BEACH FL**

TITLE **D**

NAME **GARCIA, RUTH A.**

STREET ADDRESS **500 SUNDANCE TRAIL**

CITY - ST - ZIP **VERO BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - 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 empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ruth A. Garcia RUTH A. GARCIA 4-10-95 407-231-5481  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Typed Phone #)