FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 OCHMENT #

FILED Jan 20 1998 8:00am Secretary of State

1. Corporatio	n Name	# 590 I									
		STRUCTION SE	1								
								ONE: NOIS TAND IS	ir dagar dagar da)	ALEN IAFI
Principal Plac	e of Busines	S	Mailing Addre	ess			- 1 198181 B11110 (01110	0 1401 17 910 01410 10 1	() 0 1011 010(1 1 0)		B/B// (04)
85 S. W. 52ND AVENUE 85 S. W. 52ND AVENUE											
OCALA FL 34474 OCALA FL 34474						DO NOT WRITE IN THIS SPACE				ACE.	
US			US				3. Date incorporate		IN THIS SP	ACE	
j							01/01/1979	d Or Glaimea			
2. Principal P	1055	2a. Mailing Ad	Idress	·	_	4. FEI Number			TAD	plied For	
21			26	26			59-1886910	ì			Applicable
Suite, Apt. #, etc. Suite, Apt. #,						-	5. Certificate of Stat			\$8.75	dditional
22			27				6, Certificate of Stat	us Desireu		Fee Fle	quired
City & State	6		├ ──¬ ′	City & State			8. Election Campaig	-	_	\$5.00	
23				Zip Country			Trust Fund Contribution Added to Fees				
Zip	Country		├ ─¬ `	7ip 30			8. This corporation			·	angible No
24 25 29 30 9. Name and Address of Current Registered Agent					30]		Personal Property 10. Name and Address				1 100
EN					81	Name			8		
EDWARDS, GEORGE D 85 S.W. 52ND AVENUE						St	even M. Edwar	rds			
OCALA FL 34474						Street Addr 85	ess (P.O. Box Number in S.W. 52nd Av	s Not Acceptat Zenne	ole)		ĺ
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	" "			83						
					84 (City				1 7:- C	See 1
						Oc.	ala			85 Zip (344	74
11. Pursuant	to the provis	ions of Sections 607	.0502 and 607.1508, Fk	orida Statute	s, the above-r	named corp	oration submits this stat	ement for the p	ourpose of c	hanging its	s registered
agent. La	m lamiliar w	th, and accept the o	bligations of, Section 60	07.05 05 , Flo	rida Statutes.	16 COLPOIAL	on's board of directors.	i nereby acces	or the appoin	ilineili as	registered
SIGNATURE	Steve	n M. Edwar	ds		Tiren //	. Loss	mrab_		1/14/98	3	
	Signature, typed		d agent and title if applicable AND DIRECTORS	(NOTE	Registered Agent of	signature require	ed when reinstaling) ADDITIONS/CHAN	OCC TO OFFIC	DATE PEDC AND D	IDECTOR	
12,	Ŧ	OFFICERS		DELETE	1.1 TITLE	s		IGES TO OFFIC		T Change	X Addition
NAME	EDWAR	D,GEORGE D	_		1.2 NAME	-	rances K. Bro	ነቴ/ነ	_		
STREET ADORESS		E. 45TH ST.			1.3 STREET AD		691 S.W. 190t		e Road		
CITY-ST-ZIP	OCALA				1.4 CITY-ST-2		unnellon, FL				
TITLE	P			DELETE	2.1 TITLE	T		<u> </u>	(2)	Change	Addition
NAME	EDWAR	DS,STEVEN M.			2.2 NAME	G	eorge D. Edwa	ards			
STREET ADDRESS	470 SW	63RD ST. RD.			23 STREET AD		4323 S.E. 128		et		
CITY-ST-ZIP	OCALA	FL			2. 4 CITY-ST-		cklawaha, FL				
TITLE	٧			DELETE	3.1 TITLE					Change	Addition
NAME		S, LELAND D.			3.2 NAME						
STREET ADDRESS		63RD ST RD			3.3 STREET AD						
CITY-ST-ZIP	OCALA	rL		DELETE	3.4. CITY- ST-	ZIP			r	Change	Addition
TITLE				DECEIE	4.1 TITLE				L.	J Change	L ADDITION
NAME STREET ADORESS					4. 2 NAME	DDECC					
STREET ADDRESS					4.3 STREET AD						
ÇITY-ST-ZIP TITLE		_ _		DELETE	4.4 CITY - ST - 2 5.1 TITLE	ur				Change	Addition
NAME					5.2 NAME				L		
STREET ADDRESS					5.3 STREET AD	DRESS					
CiTY-ST-ZIP					5.4 CITY-ST-2	F					
TITLE	-			DELETE	6.1 TITLE				L	Change	☐ Addition
NAME					6.2 NAME						Ī
STREET ADDRESS					6.3 STREET AD	DRESS					
CITY-ST-ZIP					6.4 CITY-ST-Z	no.					

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.