

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

FILED
Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1997



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

DOCUMENT # 664031 (2)

1. Corporation Name
HARRIS AND SCHROEDER BUILDERS, INC.



Principal Place of Business
404 W. MOWRY STREET Dr.
HOMESTEAD FL 33030
US

Mailing Address
404 W. MOWRY STREET Dr.
HOMESTEAD FL 33030-5842
US

3. Date Incorporated or Qualified **01/28/1980** 3a. Date of Last Report **02/02/1996**

4. FEI Number **59-1961366** 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

2. Principal Place of Business
 21 **404 W. Mowry Dr.**

2a. Mailing Address
 26 **404 W. Mowry Dr.**

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~HARRIS, JAMES M.~~
HARRIS, JAMES M.
19425 SW 312 ST
HOMESTEAD FL 33030

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: _____ (NOTE: Registered Agent's signature required when resigning) _____ DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME ~~HARRIS, JAMES M.~~ **HARRIS, JAMES M.**
 STREET ADDRESS ~~19425 SW 312TH ST~~ **19425 S.W. 312TH ST.**
 CITY-ST-ZIP **HOMESTEAD FL 33030**
 TITLE DELETE
 NAME **HARRIS, NAKITA S**
 STREET ADDRESS **19425 SW 312TH ST**
 CITY-ST-ZIP **HOMESTEAD FL 33030**
 TITLE DELETE
 NAME ~~HARRIS, JAMES M.~~
 STREET ADDRESS ~~19425 SW 312TH ST~~
 CITY-ST-ZIP ~~HOMESTEAD FL~~
 TITLE DELETE
 NAME **HARRIS, DORIS C**
 STREET ADDRESS **19240 SW 304TH ST**
 CITY-ST-ZIP **HOMESTEAD FL 33030**
 TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included 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.

SIGNATURE: *Nakita S. Harris* **Nakita S. Harris** 3/17/97 305-247-6154
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Digits Follow

CR2E034 (9/96)