## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION** ANNUAL REPORT 1997 **DOCUMENT #** 



## FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

G50330

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## **FILED** Aug 08 1997 8:00am Secretary of State

Principal Place	D CONST	RUCTION SERV	/ICES, INC.										
1911 S. DIXIE HWY. 1911 S. DIXIE HWY. WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401								1					
									DO NOT WRITI	~~			_
								l	3. Date Incorporated or Qualified	1	te of Last F	•	
									07/19/1983	11	<u>/18/1996</u>		╛
2. Principal P	lace of Busine	955	2a. Mailing Address					- 1	4. FEI Number		<u> </u>	pplied For	_
21			26						<u>59-2311620</u>			ot Applicable	긔
Suite, Ap1.	#, etc.		27 Suite	<del></del>					Certificate of Status Desired			Additional equired	
City & State	e		h '	City & State					6. Election Campaign Financing \$5.00 May Be				
<b>23</b> Ζίρ		Country	28	- <del>                                    </del>			ountry		Trust Fund Contribution	<u> </u>		to Fees	4
24	<del> </del>	—n ·		<u> </u>					<ol><li>This corporation owes or has pa Personal Property Tax due June</li></ol>			itangible DNo	
24	25 9. Name and Address of Currer			29     30   Registered Agent					10. Name and Address of New Re				$\dashv$
AR	RAMSON, A					81	Namo				-8		1
	23 WRY RO				Į	82	Stroot Ad	ldros	s (P.O. Box Number is Not Accepta	hla)			4
	KE WORTH						Silect Ad	idies	5 (1 :O. DOX Mullibol to Mot Accepta				
						83							
						84	City			FL	<b>85</b> Zip	Code	1
11. Pursuant	to the provision	ons of Sections 607.0	502 and 607.150	8. Florida Statut	es, the al	ove	e-named co	orpor	ation submits this statement for the	ourpose of	changing i	ts registered	┪
office or r	registered agd ım⊭amiliar wit	ent, or both, in the St h, Adac ent the ob	ate of Florida. Suc ligations of, Secti	ch change was i on 607.0505, Fli	authorize orida <b>"</b> Stat	d by utes	the corpor	ration	's board of directors, I hereby acce	pt the appo	ointment as	registered	
SIGNATURE (	/ In A	Ulleran		ARNOLL		-	MSON	1)		8/2/			
	Signature, typed o	or printed name of registered	agent and tille il applica	abie (NOT	F: Registered	Ager	nt signature req	bariuc	when reinstating)	DATE			_ لـ
12.		OFFICERS /	AND DIRECTORS		13.		<del></del>		ADDITIONS/CHANGES TO OFFI	CERS AND			-15
TITLE	ABRAMSON, ARNOLD			L DELETE		1.1 TITLE					L Change	Addition	5
NAME	3423 WR	ON, ARNOLD			1.2 NA								2
STREET ADDRESS		ORTH FL 33467			1		ADDRESS						١ų
CITY-ST-ZIP TITLE	DAVE 140	UNITI FL 33407	<del></del>	DELETE	1,4 Cl		I · Z(P				Change	Addition	٦è
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TITLE				DELFTE	6.1 70	LE					Change	Addition	
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STREET ADDRESS							ADDRESS						-
CITY-ST-ZIP			·		6.4 CT	TY-ST	T-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 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 receivor 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.