FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90215 011 ***150.00

n kadakin dang lank dalah ingapi ingan 1800 dang bian biak dibih dibih dibih dibih dibih 1800

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **G90117**

1. Corporation Name

APPLIED BUILDING DEVELOPMENTS, INC.

								(818 81 4 188
Principal Place of Business Mailing Address					1			() B) B) (Q (Q () Q ()
8933 S APOPKA VINELAND ORLANDO FL 32836		8933 APOPKA VINELAND RD ORLANDO FL 32836 US		į	DO NOT WRITE IN TH	IIS SPACE		
US US					 	3. Date Incorporated or Qualifed		
	•				1	01/25/1984		1
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21 26						59-2492063		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						_	\$8.75	Additional
22					;	5. Certifcate of Status Desired		Required
City & State City & State						6:-Election-Gampaign Financing	\$5:0	O May Be
23	,	28				Trust Fund Contribution Added to Fees		
Zip	Country Zip		Country		,	8. This corporation owes the current year	Intangible	
24	25	29	0			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			1	0. Name and Address of New Register	ed Agent	
	···		8.	Name	,			Ì
KOHN, DAVID				Street	Address	(P.O. Box Number is Not Acceptable)		
8933 S APOPKA VINELAND ROAD				0.,000	_	(,		
ORL	ANDO FL 32836		8:	3		,		1
			84	City			. 85 Zi	p 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 a	n familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statute	s.	porations	board of directors. I flavous decope the ap	pomianio do	. og.o.o.o
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere				ent signature	required whe	ADDITIONS/CHANGES TO OFFICERS	AND DIDECT	TOPS IN 12
12.			13.		τ	ADDITIONS/CHANGES TO OFFICERS	□ Chang	
TITLE	•	C 000016	1.2 NAME				٠	
NAME	OOTHIT, ANTA				Ĺ			İ
STREET ADDRESS	8933 S APOPKA-VINELAND RD			ET ADDRESS	`			}
CITY-ST-ZIP	E DELETE		1.4 CITY- 2.1 TITLE	81-ZIP	┼─	☐ Cha		e [] Addition
TITLE	,		1		1			
NAME	TOTALL, DATE T.		2.2 NAME					ļ
STREET ADDRESS	COOC O'AL OT THE WILL THE			T ADDRESS	`			
CITY-ST-ZIP	<u> </u>		2. 4 CITY- 3.1 TITLE	SI-ZIP	+-		Chang	e Addition
TITLE NAME			3.2 NAME					
STREET ADDRESS	GOLITOIT, DAIT V.			ET ADDRESS	<u>, </u>			
CITY-ST-ZIP	0000 0 / 4 01 101 111/22 4 10 112		3.4. CITY-		ĺ			Į
TITLE			4.1 TITLE		†		☐ Chang	e Addition
NAME	KOHN, DAVID		4. 2 NAME	_	Ì			
STREET ADDRESS	8933 S APOPKA-VINELAND RD		4.3 STRE	ET ADDRESS	5			Ì
CITY-ST-ZIP	ORLANDO FL 32836		4.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		}		Chang	e Addition
NAME			5.2 NAME		1			
STREET ADDRESS			5.3 STREI	ET ADDRESS	5			1
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		Ţ	· · · · · · · · · · · · · · · · · · ·	☐ Chang	e 🔲 Addition

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP. ··

14. I hereby certify that the information supplied with this filing does not qualify for the exceptation 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 any 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 all other the impowered. SIGNATURE