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

**PROFIT CORPORATION** ANNUAL REPORT

1998

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # H39876 DINSTRUCTION COMPANY C								
Principal Place	e of Business	Mailing Address				- ( SEBNANT BIBS ISUKA HANDI HANDI ABAK BIRL ANDIN ANDIN		INDIN OLONY NBST	
% VIRGINIA S. HAYA 19447 HOLLY LN LUTZ FL 33549		% VIRGINIA S. HAYA 19447 HOLLY LN LUTZ FL 33549				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
						01/28/1985		}	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	·T	Applied For	
21		26				57-2509074	F	Not Applicable	
Suite, Apt	#. etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	<b>—</b> —	5 Additional	
22		27				6. Certificate of Status Desired	Fee	Required	
City & State	e	City & State				6. Election Campaign Financing		0 May Be	
<b>23</b> Zip	Country	[28] Z <sub>(p)</sub>	Cour	ntese.		Trust Fund Contribution		d to Fees	
24 Zip	25)	, h		nt y		8. This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year ] Yes	Intangible [	
24	9. Name and Address of Curren		3U]			10. Name and Address of New Registered			
HAY	YA, VIRGINIA S.			81	Name		<del></del>		
19447 HOLLY LANE				82 :	Ctroot Add	Iress (P.O. Box Number is Not Acceptable)			
LUTZ FL 33549			ľ	0Z .	Sileet Add	riess (F.O. Box Number is Not Acceptable)			
EULE 12 00010			Ī	83					
			H	84	City		85 Z	ip Code	
			1			FL FL			
office or re agent. La: SIGNATURE	ogistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was au itions of Section 607,0505, Flor	ithorized ida Statu	l by th utes.	ne corpora	poration submits this statement for the purpose of the statement for the purpose of the app accept the app accept the app are when reinstating).	ointment	as registered	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	AVP DELETE 1			LE			Chang	e Addition	
NAME	FRY, CHRISTOPHER M. 1.2		1.2 NAI	MF					
STREET ADDRESS	304 1ST AVE S. E.		13516	REET AD	DAESS			ì	
CITY-ST-ZIP			1.4 CIT	Y-ST-	ZIP				
TITLE	•		2.1 TrT		[		Chang	e LAddition (	
NAME	HAYA, VIRGINIA S.		2.2 NAI					j	
STREET ADDRESS	19447 HOLLY LANE			REET AD	ł ·			}	
CITY - ST - ZIP			2 4 CI	TY-\$T-	ZIP		Chang	e Addition	
TITLE			3.1 IIII		[			o En vanitor	
NAME STREET ADDRESS	19447 HOLLY LANE			ME REET AD	INDEEC				
CITY-ST-ZIP	LUTZ FL			14-57-	I			1	
TITLE	LOIZ IL	DELETE	4.1 717		211	711	Chang	e Addition	
NAME			4. 2 NA		ı		_	,	
STREET ADDRESS				REET AD	DORESS			\	
CITY-ST-ZIP				Y-ST-7	- 1				
TITLE		DELETE	51 1111				Chang	e Addition	
NAME			5 2 NAI	ME				l	
STREET ADDRÉSS			5.3 STF	REET AD	ORESS			İ	
CITY-ST-ZIP			54 CIT	Y-S1-2	ZIP				
TITLE		DELFTE	6.1 TH	LF	7		☐ Chang	e 🔲 Addition	
NAME			6.2 NA	ME	1			i	

14. Thereby 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 suppliemental firmular 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.

6 3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

STREET ADORESS

CITY-ST-ZIP

**FILED** 

Feb 18 1998 8:00am

Secretary of State