SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

(2)

E & R PECK GENERAL CONTRACTORS, INC.

**FILED** Jul 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									.	
% ENVER C. PECK 9019 CYPRESS HOLLOW DR PALM BCH GDNS FL \$3418			901	% ENVER C. PECK 9019 CYPRESS HOLLOW DR PALM BCH GDNS FL 33418				DO NOT WRITE IN TH	IIS <b>SP</b> ACE	
					-			3. Date incorporated or Qualified		
								04/28/1989		
2. Principal P	lace of Busin	ness	2a.	Mailing Address				4. FEI Number	Applied For	
21			26	26				65-0136950	Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22				27				3. Certificate of Status Desired	Fee Required	
City & State				City & State				6. Election Campaign Financing	\$5.00 May Be	
23			28					Trust Fund Contribution	Added to Fees	
Zip	Country			Zip Cou			e. This corporation was of has paid the camping year intangular			
24	25			30				Personal Property Tax due June 30. X Yes No		
9. Name and Address of Current Registered Agent						81	Name	10. Name and Address of New Registere	d Agent	
	K, ENVER					01	Ivallie	ne l		
9019 CYPRESS HOLLOW DR				l		82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
PALM BOH GDNS 33418				l		83				
						63				
						84	City	FL 85 Zip Code		
44 Dunium	La ales es estada			7.4500 El-24- 01-44-	. ())	Ш	L			
office or	regist <b>ere</b> d ag	gent, or both, in the State yith, and accept the oblig	e of Florid	ia. Such change was a	authorized	l by	the corporation	ration submits this statement for the purpose of on's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE										
						Registered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12. TITLE	DPT	OFFICERS AI	AD DIKE		13. 1.1 T)T.			ADDITIONS/CHANGES TO OFFICERS		
NAME		WED C		L DELETE					Change Addition	
	AME PEOK, ENVER C. STREET ADDRESS 9019 CYPRESS HOLLOW DR				1.2 NAI		1000000			
CITY-ST-ZIP PALM BCH GDNS FL							ADDRESS			
TITLE	DVP.	TI ODIO I C		Decemen	1.4 CIT 2.1 TIT		-ZIP	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
NAME		CHARD C.		☐ DELETE	2.2 NAJ				Change Addition	
STREET ADDRESS		TWOOD CIRCLE					ADDRESS			
CITY-ST-ZIP		LM BEACH FL								
TITLE	WEGT IA	ILM DENOTTE		DELETE	2.4 CIT		-2119			
NAME				L DELETE	3.2 NA				Change Addition	
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					3.4 CIT					
TITLE				DELETE	4.1 TITI		·ZIF		Obarra D 14494-	
NAME				vecete	4.2 NA				☐ Change ☐ Addition	
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					4.4 CIT					
TITLE				DELETE	5.1 TITI				Change Addition	
NAME				OECLIE	5.2 NAM				Change Addition	
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					5.4 CIT					
TITLE				DELETE	6.1 TITL				Change Addition	
NAME				□ DELETE	6.2 NAM				T CHRISTS T MOUTOU	
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					6.4 CIT					
d4 I haraby so	edifu that the	Information a subject (in	44.5- #ili-		0.4 CII	1-01-	*Z11"			

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 accurrate 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 to 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, if on an attachment with an address.

6/98 (561) 6242755.