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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P18248

(5)

FILED
Apr 22 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address 1532 DUNWOODY VILLAGE PKWY 150 ATLANTA GA 30338 BOWEN CONSTRUCTION SERVICES, INC. Mailing Address 1532 DUNWOODY VILLAGE PKWY 150 ATLANTA GA 30338 ATLANTA GA 303384138					
U\$		US		3. Date Incorporated or Qualified	3a. Date of Last Report
9 Denoted I	Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	03/01/1988 4. FEI Number	02/13/1996
21	Igua or ousiness	26. Walling Address		58-1757924	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			SR 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	lei	City & State		6. Election Campaign Financing	\$5.00 May Be
23 700	Country	28	Country	Trust Fund Contribution	☐ Added to Fees
24	25		30	8. This corporation has liability for in	ntangible tax under s. 199.032. □] Yes □ No
124)	9. Name and Address of Curre		301	10. Name and Address of New Re	
CT (CORPORATION SYSTEM		81 Name		
	O S. PINE ISLAND ROAD		B2 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
PLA	NTATION FL 33324				
		•	83		
			84 City		FL 85 Zip Code
agent La SiGNATURE	Styrulary , 1906 for printed trainin of registered ag		Registered Agent signature requirements.	poration submits this statement for the p ion's board of directors. I hereby accept the directors of the property of the prope	DATE
1 [1]	PTD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CITY - ST - ZIP	BOWEN, HOWARD E. 1352 DUNWOODY VILLAGE P ATLANTA GA	KWY #150	1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-Zip		
THE	VSD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BOWEN, DORIS		2.2 NAME		
SURSEL ADDRESS	ss 1532 DUNWOODY VILLAGE PKWY #150		2 3 STREET ADDRESS		
CITY-ST-739	ATLANTA GA		2. 4 CITY - ST - ZIP		
1845	AS WOOLD DUCKA	DELETE	3.1 TITLE		Change L Addition
NAME	Wright, Sheila 1532 Dunwoody Village P	MW 4150	32 NAME		4
STREET ADDRESS	ATLANTA GA	MII # 100	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CHY-ST ZIP	AICHIIA GA	DELETE	4.1 TITLE	,	Change Addition
NAME			4.2 NAME		•
STREET ADDRESS	}		4.3 STREET ADDRESS		
City St. 79			4.4 CITY-ST-ZIP		
1:1.E		☐ DELETE	5.1 TITLE		Change Addition
NAMI			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-S1-ZIP		T DELETE	5.4 CITY-ST-ZIP		Change Addition
THELE		DETELE	6.1 TITLE		Change Addition
NA'M			6.2 NAME		

6.3 STREET ADDRESS

SIGNATURE:

STREET ACORESS

14. I do nereby 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 eath, 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.