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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation LOPEZ	BUILDING COMPANY	00014121 (9)			(1) 1 (1) 1116 (164 (164 (164 (164 (164 (164 (164
Principal Place of Business Mailing Address				T (BD)(OP) 178 (BD)(BO() BO() BO() BO() BO() BO())
6245 S DALE MABRY HWY TAMPA FL 33611 US		6245 S DALE MABRY HW TAMPA FL 33611 US	Υ	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		10/10/1994 4. FEI Number	Applied For
21		26		65-0548174	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	26		Trust Fund Contribution	Added to Fees
24 Zip	25	Z _I p	Country	8. This corporation owes or has paid the co	
24	9. Name and Address of C	urrent Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
DE	CHEL, THEODORE J ESQ		81 Name	10. Hamo and Places of How Hogistere	, whole
	DS W BUSCH BLVD				7
TAMPA FL 33612			82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
773	IIII IT I E VVVIE		83		
			A1 0		
			84 City	FI	85 Zip Code
11, Pursuant office or r agent. La	to the provisions of Sections 60: registered agent, or both, in the im familiar with, and accept the	7.0502 and 607.1508, Florida Statule State of Florida. Such change was a obligations of, Section 607.0505, Flo	es, the above-named corp authorized by the corporal orida Statutes.	poration submits this statement for the purpose a tion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE					İ
40	Signature, typed or printed name of register		. Registered Agent signature requir		
12. TITLE	D	S AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	
NAME	LOPEZ, ORCHID		1.2 NAME		Change Addition
STREET ADDRESS	3223 NASSAU ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33607		1.4 CiTY - ST - ZiP		İ
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	LOPEZ, GUSTAVO	_	2.2 NAME		
STREET ADDRESS	3223 NASSAU ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 THE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STHEET ADDRESS		
CITY-ST-ZIP			3.4. C(TY-ST-ZIP		
TITLE		☐ DELETE	4.1 T(1LE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	·	
CITY-ST-ZIP	······································	DOLOTE	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME CIRCLY ADDRESS			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		pricit	6.2 NAME		Change Magniou
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		

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 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 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.

FILED

Feb 17 1998 8:00am

Secretary of State