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

PROFIT CORPORATION **ANNUAL REPORT** 1000

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 19 1998 8:00am Secretary of State

1990											
DOCUMENT # P970000 7 044 1. Corporation Name AEgos Construction, Inc.											
1.	1. Corporation Name According Conset Cuchion The.										
	AEgon Construction, 100.										
Principal Place of Business Mailing Address											
	320 Sh	344 AVE	en 10	IH AVL							
	Pembro	ske Pines, 32	snoke Pi	~85, 3 L			DO NOT WRI		SPACE		
		,			3.	, ,	porated or Qualifie	d			
<u> </u>	2. Principal Place of Business 2a. Mailing Address						4. FEI Number			TAN	plied For
21	i inicipal i lace c	, Duality So	26					5721157	ک		t Applicable
	Suite, Apt. #, etc		Suite, Apt. #, etc.			5.	. Certificate	of Status Desired		\$8.75 A	
22	Oit & City		City & State							Fee Re	
23	City & State		28			6.		impaign Financing Contribution		\$5.00 Added to	•
	Zip	Country	Zip	C	ountry	8.		ation owes or has	paid the cu		
24		25	29	30				roperty Tax due Ju			No No
	9.	Name and Address of Current	Registered Agent		81 Name	10.		Address of New	Registered	Agent	
	•			H. BI	Lyn	2 2563	NANN				
						Address (I		mber is Not Accep	table) とい し		
	•					/-	V t	Pines			
				84 City	M DY	COLC	+ wosa		85 Zip C	Seps C	
	Durguant to the	provisions of Sections 607.0502	and 607 1508 Florida	Statutes the	ahove-named	cornoratio	on eubmite th	is statement for the	FL e purpose o	f changing its	e registered
'''	office or registe	provisions of Sections 607.0502 red agent, or both, in the State of ilier with, and accept the obligat	of Florida Such change	was authoriz	ed by the corp	poration's	board of dire	ctors. I hereby acc	cept the app	pointment as	registered
6,0	SNATURE	Company and acceptance obligation	atutes.				4/24/	98			
310	Signato	re, typed or printed hymic of registered agent		red Agent signature	· · · · · · · · · · · · · · · · · · ·			DATE		·	
12		OFFICERS AND	D BELF	13 TE 13	TITLE		ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTOR:	S IN 12
TITU NAM	131	MAN REENNA	~		NAME					C Change	LJ Addition
	EET ADDRESS	15 NW 109 AV	-	13	STREET ADDRESS						
Cim	Y-ST-ZIP	HEWPORT BINE;			CITY - ST - ZIP						
TITL	.E	Scarstany	DELE	- 1	TITLE	c*				Change	Addition
NAN 		Al Variable			NAME						
	EET ADDRESS	Toyton &	347 1 -		STREET ADDRESS						
TITL	Y-ST-ZIP .E	Meston, 31 3	DELE DELE		TITLE					☐ Change	Addition
NAN	ME			3.2	NAME						
STR	EET ADDRESS	Al Horiens ma	4	3.3	STREET ADDRESS						
_	Y-ST-ZIP	WESTER, IL 3	<u> 3326</u>		. CITY-ST-ZIP			T. P. P		Channe	Addition
ודוד		,	DELE		TITLE		600	00025; 19/9801	295(Addition
NAN STR	NEET ADDRESS				STREET ADDRESS	,	-05/	'19/98011	08004	19	
	Y-ST-ZIP				CITY-ST-ZIP		非非洲	50.00			
TITE			☐ DELE		TITLE		-			Change	☐ Addition
NA	WE			5.2	NAME					<u></u>	Lin
1	REET ADDRESS				STREET ADDRESS					3	4117
	Y-ST-ZIP		☐ DELE		CITY-ST-ZIP TITLE		·		-	Change	Addition
TITE	!		_ 7.00		NAME					C. Ideilife	
	EET ADDRESS				STREET ADDRESS						
CIT	Y-ST-ZIP			64	CITY-ST-ZIP						
	1 5 5 50	that the information europlied wit	h this filias doss not a	olifu for the c	vemption state	d in Conti	on 110 07/31	(i) Florida Statutes	e I further of	artifu that the	information 1

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 turther 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.