FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90170 048 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$20895

R W B CONSTRUCTION, INC.										
									il Black Bible Bi	
Principal Place		Mailing Address								
1660 BLANDING BLVD. JACKSONVILLE FL 32210 1660 BLANDING BLVD. JACKSONVILLE FL 32210							DO NOT WRI	TE IN THIS	SPACE	
							3. Date Incorporated or Qualifed			
							12/05/1990			
2. Principal P	tace of Business	2a. Mailing Addre	ss				4. FEI Number		Api	plied For
21		26					<u>59-3038771</u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #,					5. Certificate of Status Desired		\$8.75 A Fee Re	
City & Stat	e	City & State	City & State				6. Election Campaign Financing		\$5.00	•
23		28					Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip .		ountry		•	8. This corporation owes the curr	ent year Inta		□No
24	25	29	30				Personal Property Tax. 10. Name and Address of New I	Penistered A		
	9. Name and Address of Curre	iii Kagisteleu Agelit		81	Name		10. Name and Address of New	togictor ++ :	· 9 -···	
BENJAMIN, ROBERT W. 7536 JANA LANE NORTH					Stree	t Addre	ss (P.O. Box Number is Not Accept	able)	h	
JACKSONVILLE FL 32210				83						
				84	City		 		85 Zip (Code
								<u>FL</u>		
11. Pursuant office or ragent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florid e of Florida. Such chang ations of, Section 607.0	la Statutes, the je was authoriz i505, Florida St	above zed by tatutes	e-name the corp	d corpo poration	ration submits this statement for the 's board of directors. I hereby acce	purpose of optithe appoir	tment as re	registered gistered
SIGNATURE	•						when reinstating)	DATE		
12.	Signature, typed or printed name of registered ag	ND DIRECTORS		3.	it signature	3 ladonao	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	S			1 TITLE		T	TISSITIONS OF WATER OF ST		☐ Change	☐ Addition
NAME	THOMACIA, BENJAMIN		1.2	2 NAME						
STREET ADDRESS	1660 BLANDING BLVD		1.3	3 STREET	ADDRES!	s				
CITY-ST-ZIP	JACKSONVILLE FL		1.4	4 CITY-S	T-ZIP					
TITLE	P/T	□ D€	LETE 2.1	1 TITLE					☐ Change	☐ Addition
NAME	BENJAMIN, ROBERT W.		2.2	2 NAME						
STREET ADDRESS	1660 BLANDING BLVD		2.3	3 STREE	TADDRES:	s				
CITY-ST-ZIP	JACKSONVILLE FL 32210		2.	4 CITY-5	T-ZIP					
TITLE		□ D£	LETE 3.º	1 TITLE					☐ Change	☐ Addition
NAME			3.2	2 NAME			•			
STREET ADDRESS			3.3	3 STREE	TADORES:	s				
CITY-ST-ZIP		Tring		4. CITY-S	T-ZIP_	+				C t 44/linn
TITLE	ļ	∐ DI		1 TITLE					☐ Change	☐ Addition
NAME				2 NAME						
STREET ADDRESS					T ADDRES	8				
CITY-ST-ZIP				4 CITY-S 1 TITLE	ı-ZIP	+			☐ Change	Addition
TITLE		C) Di		2 NAME						
NAME PERCET APPRECES					T ADDRES	s				
STREET ADDRESS			1	4 CITY-S						
CITY-ST-ZIP TITLE						_				C Addition
I IIILE		☐ DI	LETE 6.	1 TITLE					Change	Addition
NAME		ان 🗍 ان		1 TITLE 2 NAME					[_] Change	∐ Adalijon

14. 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 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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP