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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 05 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S29384

(2)

NANCE CONSTRUCTORS, INC.

Principal Place of Business 6411 SW 7 ST PEMBROKE PINES FL 33023		Mailing Address 6411 SW 7 ST PEMBROKE PINES FL 33023-1519			
•				3. Date Incorporated or Qualified 02/01/1991	3a. Date of Last Report 06/27/1996
.2. Principal Fl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 Cuito Apt # 610		65-0244647	Not Applicab
Suite Apt	и, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State	······································	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
. Ζφ 	Country	Zip	Country	This corporation has liability for Florida Statutes	iptangible tax under s. 199.032, Yes No
24	25 9. Name and Address of Curr	29 ent Registered Agent	30	10. Name and Address of New Re	
SAN	TIAGO, NANCY J.		81 Name		<u> </u>
	SW 7 ST		82 Street Add	dress (P.O. Box Number is Not Acceptate	nie)
PEM	BROKE PINES FL 33023		Silder Add	Siess (F.O. Dox (1011)DOT IS NOT NOODPLAN	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			83		
			84 City		85 Zip Code
					FL 18 2 P COOR
11. Pursuant f office or re agent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607,1508, Florida Statut ite of Florida. Such change was i igations of, Section 607,0505, Flo	es, the above-named cor authorized by the corpora orida Statutes.	rporation submits this statement for the pation's board of directors. I hereby acceptions	ourpose or changing its registered the appointment as registered
SIGNATURE	Sequencies typeg or princed name of registered.	100	C. Description Association to the	ing when chelding	CIATE
12.		Agent and little if applicable [NOT	E: Registered Agent signature requ	ADDITIONS/CHANGES TO OFFIC	
inte	PTO	DELETE	1.1 TITLE		☐ Change ☐ Addition
MAVE:	SANTIAGO, NANCY J.		1.2 NAME		
STREET ADDRESS	6411 SW 7 ST		1.3 STREET ADDRESS		
`C1TY+\$T+7IP	PEMBROKE PINES FL		1.4 CITY-ST-ZIP		
TITLE	VSD	DELETÉ	2.1 TITLE		Change Addition
NAME	SANTIAGO, CESAR R.		2.2 NAME		
STREET ADDRESS	6411 SW 7 ST		2.3 STREET ADDRESS		
C(fy - \$1 - 7)P	PEMBROKE PINES FL		2. 4 CITY-ST-ZIP	<u> </u>	
31111.		DELETE	3.1 TITLE		Change Addition
, NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
: C(1Y - S1 - 7(P		L locutati	3.4. C/TY-ST-ZIP		Change Additi
Tinte		☐ DELETE	4.1 TITLE		Cloudings Clauding
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Later and the second se	☐ Change ☐ Additi
		Car Secret	5.2 NAME		
NAME STUDIT APPOULSE			5.3 STREET ADDRESS		
STREET ACORESS			5.4 CITY-ST-ZIP		
CITY-ST-7IP TITLE	A. AMAY. B. PRIPER P	☐ DELETE	6.1 TIFLE		Change Addili
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		,
CITY-S1-ZIP			6.4 CITY-ST-ZIP		
14 Ldo borol	by certify that the information supp	lied with this filing does not qual	fy for the exemption state	ed in Section 119.07(3)(i), Florida Statute	es. I further certify that the
lam an n	m indicated on this annual report of flicer or director of the corporation in Block 12 or Block 13 if changed	or the receiver or trustee empoy	vered to execute this rep-	at my signature shall have the same leg- ort as required by Chapter 607, Florida	si enect as it made under bath; t Statules; and that my name