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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Feb 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 664101

(3)

C.A.K. BUILDERS, INC.							
Principal Place	a of Business	Mailing Address			1 10000 Dans Dina Disa Disa Disa Disa Disa Disa Disa Dis	JABA BARA BARA PIDIL DIDI	
6202 ALAN RD MARGATE FL 33063 6202 ALAN RD MARGATE FL 33063							
					3. Date Incorporated or Qualified 01/30/1980	3a. Date of Last 03/29/1996	
	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26		·	59-1965410		lot Applicable
Suite, Apt. (#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & State	^	City & State			<u> </u>		
23	,	28			B. Election Campaign Financing Trust Fund Contribution		May Be
Zip	······································		Country		8. This corporation has liability for Intangible tax under s. 199.032,		
24			30	,	Florida Statutes Yes No		
	g. Name and Address of Curre	····			10. Name and Address of New Reg		
КОН	INERT, CHARLES ANTHONY			81 Name	V		
6202 ALAN ROAD				2 Street Address (P.O. Box Number is Not Acceptable)			
MARGATE FL 33063				83	000 (110.000.100.100.100.100.100.100.100.100		
			1			Tow 1 70	
				84 City		FL 65 Zip	Code
11. Pursuant to office or reagent. I ar	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statt e of Florida. Such change was galions of, Section 607.0505, I	utes, the at authorized Florida Stat	ove-named corp to by the corporati utes.	poration submits this statement for the pution's board of directors. I hereby accept	urpose of changing the appointment a	its registered s registered
SIGNATURE	Character to the and an explanation of republic at a	cast and tale it analogida (Nr	ATE: Danielara	* * anns signature reguli	and the principality	DATE	
Stgrief xe, typed or printed name of registered agent and title it applicable. (NOTI 12. OFFICERS AND DIRECTORS				gistered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	DELETE		TLE	Applitotological to control	☐ Change	
NAME	KOHNERT, CHARLES A.		1.2 N/	1			
STREET ADDRESS	6202 ALAN RD		1.3 \$1	REET ADDRESS			
CITY-S1-ZIP	MARGATE FL		1.4 01	TY-ST-ZIP			
TITLE		DELETE 2		TLE		☐ Change	Addition
NAME			2.2 NA	(ME			
STREET ADDRESS			23 \$1	REET ADDRESS	•		
CITY-SI-ZIP	<u> </u>		2 4 C	ITY-ST-ZIP			
TITLE		☐ DELETE	3 1 TN	ILE		Change	☐ Addition
NAME			3.2 NA	ME .			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP				ity-st-zip			T-1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE		☐ DELETE	4.1 Til			Change	Addition
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP		D DELETE		TY - ST - ZIP		1 7 01	Addition.
TITLE		DELETE	5.1 11	1		L Change	Addition
NAMÉ			5.2 N/		↓		
STREET ADDRESS			5.3 ST	TREET ADDRESS			
CITY-ST-ZIP		Decire		TY-ST-ZIP	1.1	770	T Leader-
TITLE		DELETE	6.1 TI		4	L Change	Addition
NAME			6.2 N/	l l	*		
STREET ADDRESS			6.3 S1	TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
informatio Lam an of	on indicated on this annual report or	r supplemental annual report is or the receiver or trustee empo	s true and a owered to a	accurate and that	d in Section 119.07(3)(i), Florida Statutes It my signature shall have the same legal rit as required by Chapter 607, Florida S	l effect as if made u	inder oath; that