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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # F208

(7)

CONTRACT CONSTRUCTION, INC.

FILED Jan 21 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									t in dilled 1148 floor books and be been in her beste been block of the block of the best been in the best been been been been been been been bee		
1193 ENTERP	RISE DR		1	1193 ENTERPRISE DR							
BLDG A-UNIT 5 PT CHARLOTTE FL 33953				BLDG A UNIT 5					DO NOT WRITE IN THIS SPACE		
US	1E FL 33333			PT CHARLOTTE FL 33953 US					3. Date Incorporated or Qualified	\neg	
1			·						02/17/1981		
2. Principal P	lace of Busin	ness	2a.	2a. Mailing Address					4. FEI Number Applied For		
21				26					59-2060804 Not Applicab	le	
Suite, Apt.	#, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional		
22				27					Fee Required		
City & State				City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution		
Zip Country			28	Zip Country			v		This corporation owes or has paid the current year Intangible		
24	25		29	- '		,			Personal Property Tax due June 30. Yes No	Ì	
9. Name and Address of Current									10. Name and Address of New Registered Agent		
ALBRECHT, ARTHUR							N	ame			
	IS HARBOR						! Si	treet Addres	ess (P.O. Box Number is Not Acceptable)		
PORT CHARLOTTE FL 33952										\dashv	
							C	ltve	85 Zip Code	-	
						84	-	•	FL '		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.	Signature, typed	ND DIREC				13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ᅥ		
TITLE	PT	0(110210)	. 10 0	DELETE		TITLE			Change Addition	<u></u>	
NAME		HT, ARTHUR			1,2	NAME					
STREET ADDRESS					1.3 STF		T ADDI	RESS		İ	
CITY - ST - ZIP	PORT C	HARLOTTE, FL 000	00		1.4 СП		1.4 CITY-ST-ZIP				
TITLE	VS			DELETE	DELETE 2.1 TM				Change Addition	m	
NAME	ALBREC	HT, MARY CATHER	INE	2.2 M		2.2 NAME					
STREET ADDRESS 1313 HARBOR BLVD.				2.3 S			2.3 STREET ADDRESS				
CITY-ST-ZIP	PORT C	HARLOTTE FL					ST-Z	Р	<u> </u>		
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TITLE				I DECEIL		TITLE NAME			Change Addition	"	
NAME								200			
STREET ADDRESS					4	STREET		1			
CITY-ST-ZIP	ertify that the	e Information supplied	with this fi	ling does not qualify	for the ex	city-s kemp	tion	stated in Se	ection 119.07(3)(i), Florida Statutes, I further certify that the information	7	
indicated	on this annu	al report or supplemen	ital annual	report is true and a	ccurate a	nd the	at m	y signature	shall have the same legal effect as if made under oath; that I am an		

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 changed, or on an attachment with an address.

SIGNATURE:

ary C. CALBRECHE REPORTED SHELLER

1/12/98

CR2E034 (10/97)