

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

REC'D FEB 18 1999

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

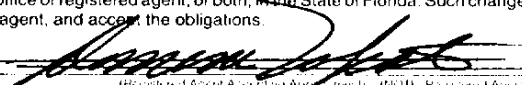
1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L98000001338
ANGELO IAFRATE CONSTRUCTION, L.L.C.
26400 SHERWOOD
WARREN MI 48091

1a. Principal Place of Business Address
**26400 SHERWOOD
WARREN MI 48091**

2. Principal Place of Business 500 Reynolds Dr. Suite, Apt. #, etc.	2a. Mailing Address P.O. Box 1084 Suite, Apt. #, etc.	3. Date Organized or Qualified 07/31/1998	3a. State of Formation FL
City & State RUSTON LA	City & State RUSTON LA	4. FEI Number 38-3424695	☐ Applied For ☐ Not Applicable
Zip 71270	Country	5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required ☒

7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

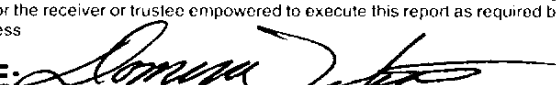
SIGNATURE  DATE **3/1/99**

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	IAFRATE, ANGELO E	26400 SHERWOOD	WARREN MI
MGR	IAFRATE, DOMINIC	26400 SHERWOOD	WARREN MI

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-03/30/99--01081--017
****197.50 ****197.50

SL
3-26-99

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE  3/1/99 810-756-1070