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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 152397

(6)

FILED Feb 19 1998 8:00am Secretary of State

1. Corporatio	L CONSTRUCTION COMPA	ANY			I I DELET HEEL THE HEEL HALL HELL HELL HEEL HEEL	511 3450 BIEN 8150 8150 BIEN 8180 1851
Principal Plac	e of Business	Mailing Address				BAN BABAN DIWAN DADAN BABAN DADAN ADBA
LEWIS H MARKS LEWIS H MARKS						
6860 BEACH BLVD 6860 BEACH BLVD						
JACKSONVILLE FL 32216 JACKSONVILLE FL 32216					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	
					09/22/1947	
	cipal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21					59-0581850	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #					5. Certificate of Status Desired	\$8.75 Additional
22						Fee Required
	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5,00 May Be	
Zip	Country	Zip Country				
24	25	29	H	шу	8. This corporation owes or has paid the Personal Property Tax due June 30.	ne current year intangible
24	g. Name and Address of Curren		[30]	····	10. Name and Address of New Regist	
144	RKS.LEWIS H			1 Name	10. 110	No.
6860 BEACH BLVD.			L			
JACKSONVILLE FL 32216			8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
JA	CROUNVILLE PL 32216		-	3		
i			1	· •		
			Ī	4 City		85 Zip Code
da Disassa	1- 4h inion (Sao) C07 OFO	2 and 607 4500 Finding Otat.	100 100 00	1	All the state of t	FL 65 Zip code
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the corpor	orporation submits this statement for the purp ration's board of directors. I hereby accept th	e appointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	lorida Statu	es.	·	1
SIGNATURE						DATE
12,	Signature typed or printed name of registered ago OFFICERS AN		13.	gent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFICER	
TITLE	PD	DELETE	1.1 1/1	- T	ADDITIONS/CHANGES TO OFFICER	Change Addition
NAME	MARKS,LEWIS H	<u></u>	1.2 NAM	ĺ		
STREET ADDRESS	AND LINEOUS LAND			ET ADDRESS		
	JACKSONVILLE FL 32217			í		
CITY-ST-ZIP TITLE	T	DELETE	2.1 TITL	-ST-ZIP		Change Addition
NAME	MARKS, BETTY BALFOUR		2.2 NAM			E shalles E Marian
	6820 LINFORD LANE		f	·		1
STREET ADDRESS	JACKSONVILLE FL 32217			ET ADDRESS		
CITY-ST-ZIP	D	DELETE	_	-ST-ZIP		Change Addition
TITLE	MARKS,BETTY BALFOUR	□ DELETE	3.1 TITU	1		The cuantile The Whitelian
NAME	6820 LINFORD LANE		3.2 NAM	· .		
STREET ADDRESS	JACKSONVILLE FL 32217			ET ADDRESS		ł
CITY-ST-ZIP	UNUNDUNVILLE FL 3221/	DESCRE		-ST-ZIP		Change Ladetista-
TITLE		☐ DELETE	4.1 TITLE	J		Change Addition
NAME			4. 2 NAN			
STREET ADDRESS				et address		
CITY-ST-ZIP			4.4 CITY			
TITLE		DELETÉ	5.1 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP_		
TITLE		DELETÉ	6.1 TITLE			Change Addition
NAME			6.2 NAM			
STREET ADDRESS			6.3 STRE	et address		
CITY-ST-ZIP			6.4 CITY	1		

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 changed, or on an attachment with an address.

CICALATURE

Tayon It Whater to

2/16/98

924-125-2934