PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 329236

*TIDEWAY CONSTRUCTION CO: INC

	•
Principal Place of Business	

1250 OLD DIXIE HWY

LAKE PARK FL 33403

Mailing Address 1250 OLD DIXIE HWY

LAKE PARK FL 33403

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90217 006 ***150.00



					DO NOT WRITE IN 1	HIS SPACE	
					3. Date Incorporated or Qualifed		
					04/24/1968		l
a Principal	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Apr	lied For
	, '				59-1216435	<u> </u>	Applicable
21		26		-	39-12 10433		
Suite, Apt. #, etc. 22 27			Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zìp	Country	Zip	Country	,	8. This corporation owes the current year	r Intangible	
24	. 25	29 3	30		Personal Property Tax.		
24]	9. Name and Address of Curre		ž1——		10. Name and Address of New Register	ed Agent	-
	9. Haille and Addition of Curre	it registered Agent	81	Name	10.		
· 11V/	ANILE,EUGENE						
			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	O AVE A						
HIV	IERA BEACH FL 33404		83				
	•		84	City		-L 85 Zip C	ode
44 Diseason	to the assuicions of Sections 607 050	02 and 607 1508 Florida Statutes	the above	e-named com	oration submits this statement for the purpose	e of changing its	registered
office or	registered agent, or both, in the State am familiar with, and accept the obligation	of Florida. Such change was aut	honzed by	tne corporation	on's board of directors. I hereby accept the ap	ppointment as reg	istered
SIGNATURE	_						
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: R	egistered Age	nt signature require	d when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	UVANILE,EUGENE		1.2 NAME	3			
	المديم ويضا		12 07000	T ADDRESS			
STREET ADDRES							
CITY-ST-ZIP	RIVIERA BEACH FL	DELETE	1.4 CITY-5	ST-ZIP		Change	☐ Addition
TITLE	VS	C DELETE	2.1 TITLE			cridings	
NAME	BASTIEN, DENNIS L.		2.2 NAME				
STREET ADDRÉS	455 FORESTERIA DR.		2.3 STREE	T ADDRESS			
CITY-ST-ZIP	LAKE PARK FL		2. 4 CITY-	ST-ZIP	·		
TITLE	V	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME	UVANILE, JOSEPH		3.2 NAME	1			
				TADDRESS			
STREET ADDRES	1000 000 0000						
CITY-ST-ZIP	LAKE PARK FL	☐ DELETE	3.4. CITY- 4.1 TITLE	91-7IL		Change	☐ Addition
TITLE	i		1			_ , ,,	_
NAME			4. 2 NAME				
STREET ADDRES	s		4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TTTLE			Change	☐ Addition
NAME	1		5.2 NAME				
STREET ADDRÉS	s l		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	-		5.4 CITY-	ST-ZIP			
		DELETE	6.1 TITLE			☐ Change	Addition
TITLE			6.2 NAME			_ ,	_
NAME			1	T ADDDECC			
STREET ADDRES	s : 17 - 17 - 17 - 17 - 17 - 17 - 17 - 17			TADDRESS			
	L .		C 4 OID/	37 ZID			

14. I hereby certify that the information supplied with this filling 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 sustee 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, br on an attachment with an address, with all other like empowered.

SIGNATURE: