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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 401206

1. Corporation Name

ROBERT E. HOWARD CONSTRUCTION, INC.

Principal Plac	e of Business	Mailing Address				1 102111 Athir Asie; maid [[Sti	Seri #4817 E	***** B.401 A.41)	51411 615-1 1981
5497 FLINT RD	1	5497 FLINT RD							
COCOA FL 32927 COCOA FL 32927					1 .	DO NOT WRITE IN THIS SPACE			
U\$ U\$					a Date	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
- 	-				05/	15/1972			
2. Principal Place of Business 2a. Mailing Address				IANA DRIVE		Number			pplied For
21 421	8 HAUANA DRIVE	/ W / U / I / ·	JANA	UNI	vi 59	1496699			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Cert	tifcate of Status Desired			Additional equired
City & State City & State City & State City & COCO A City & COCO A							May Be to Fees		
Zip 729	27 25 BLEVAN	10 29 32927 3	Country 30 BR	WAR	10 Per	corporation owes the cursonal Property Tax.		Yes	ZNo
	9. Name and Address of Currer				10. Nar	ne and Address of New	Registered	Agent	
	_		81	Name					
PURCELL, WILLIAM C 633 S. ANDREWS 3RD FLOOR				82 Street Address (P.O. Box Number is Not Acceptable)					
				000.77					
FT. I	LAUDERDALE FL 33301		83						
			84	City				85 Zip	Code
				-			<u> </u>	<u> </u>	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations are considered to the control of th	of Florida. Such change was aut tions of, Section 607.0505, Florid	nonzed by Ja Statutes.	ine corpor	ration's board (or directors. Thereby acce	opt the appoi	intment as re	ogistered
Orginative, types of printed interest and property of the prop					quired when reinstat	TIONS/CHANGES TO O		ND DIRECTO	OPS IN 12
12.	OFFICERS AND DIRECTORS 1.							Change	Addition
TITLE			1.2 NAME	1.1 TITLE PE		DROBERT HAUANA CO DA, FL 329	E.	.	_
NAME	A			12 STREET ADDRESS		HAUANA O	RIUL		
STREET ADDRESS				1.3 STREET ADDRESS 4		A FL 329	727		
CITY-ST-ZIP	PLANTATION FL	☐ DELETE	2.1 TITLE	-217		1		Change	Addition
TITLE					1				_
NAME			•	2.2 NAME 2.3 STREET ADDRESS					}
STREET ADDRESS	LE! ADDITEO		2. 4 CITY-ST-ZIP						
CITY-ST-ZIP			3.1 TITLE	1-212				Change	Addition
TITLE	_			3.2 NAME					
NAME :			1	ADDRESS					ì
STREET ADDRESS	EET ADDITION		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						1
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	1-214				☐ Change	Addition
_			- 4. 2 NAME			وحميت المستنامين	: <u>-</u>		احتجيجي
NAME			4.3 STREET	ADDRESS					Į
STREET ADDRESS			4.3 STREET						ſ
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	- 48	-			☐ Change	Addition
			5.2 NAME					,	
NAME I			5.3 STREET	ADDRESS		•			
STREET ADDRESS			5.4 CITY-S1					•	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	_			· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
NAME	-	_ 5	6.2 NAME						Ì
NAME 1				1					

CITY-ST-ZIP 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 prior on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90050 019 ***150.00