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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

100 CHURCH ST.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 02 1997 8:00am

Secretary of State

Secretary of State .
DIVISION OF CORPORATIONS

DOCUMENT # 405797

(2)

Mailing Address

PO DRAWER 1250

SEA SCAPING CONSTRUCTION CO. INC.

SANTA ROSA US	BCH FL 32459)	SAN Us	ITA ROSA BCH FL 32	459-1250		•							
									3. Date Incorp. 07/27/19		alified	1	te of Last F 22/1996	•
2. Principal Place of Business				2a. Mailing Address				4	4. FEI Number				A	pplied For
21				26					59-1423653 Not Applicab					ot Applicable
Suite. Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of	f Status Desi	red	X	•	Additional equired	
City & State				City & State				6. Election Can	npaign Finar	ncing		\$5.00	May Be	
23				18			l	Trust Fund C	Contribution	<u> </u>			to Fees	
Zip		Country	Z	(ip	Cou	intry			8. This corpora	tion has liab	ility for i	ntangible	tax under s	199.032,
24	2	5	29		30				Florida Statu			Yes	No	
	9, Name a	nd Address of Cur	rent Registe	red Agent		L.,		1(0. Name and	Address of I	New Re	gistered /	\gent	
PAT	ITERSON, S	era a				81	Name							
100	CHURCH S		B2 Street Ad			Address	ddress (P.O. Box Number is Not Acceptable)							
SANTA ROSA BCH FL 32459				Oliver N			Nuureas I	ocioso (1.0. pos tantinos is trot moceptable)						
						83				· · · · · · · · · · · · · · · · · · ·				
														·
						84	City			3, 111	100	FL	85 Zip	Code
11. Pursuant	to the provision	ns of Sections 607.6	1502 and 607	.1508, Florida Statuti	es the al	hove	-named	corporati	tion submits this	s statement f	or the n		changing i	ts registered
agent Fa	registered age im familiar with	nt, or both, in the St n, and accept the ob	ate of Florida lligations of, s	Such change was a Section 607,0505, Flo	authorized orida Stat	d by lutes	the corp i.	poration's	s board of direc	tors. I hereb	у ассер	t the app	ointment as	registered
SIGNATURE	Signature, typed or	r pented name of registered	agent and title if r	applicable. (NOT)	E Registered	d Age	nt signature	required wh	nen reinstating)		·····	DATE		
12.		OFFICERS /	AND DIRECT	ORS	13.	•			ADDITIONS/C	HANGES TO	OFFIC	ERS AND	DIRECTOR	RS IN 12
HILE	PST			DELETE	1.1 TO	TLE		[Change	Addition
NAME	PATTERS	on, sera a			1.2 N/	AME	-							
STREET ADDRESS	100 CHUF			1		3 STREET ADDRESS		ŀ						
CITY-SI-ZIE		OSA BOH FL			1.4 CI									
TITLE	8			DELETE	2.1 10		t - Eir	····					Change	Addition
NAME	-	ON, SERA A			2.2 N/								L Ontarigo	
STREET ADORESS	100 CHUF						address							
		OSA BCH. FL			4									
TITLE	ONITIO III	DON DOTI. I'L		DELETE	2. 4 C 3.1 Til		51 - ZIP	ļ				· · · · · · · · · · · · · · · · · · ·	Change	Addition
				□ ottere	1								FT Cuaride	- Modifion
NAME							3.2 NAME							
STREET ADDRESS							address							
C(1) Y - S(1 - 2)F				T DELETA	3.4. C		T- ZIP	ļ					T-1 a.	
THE	ļ			DELETE	4.1 30	TLE							Change	Addition
NAME					4. 2 N	AME								
STREET ADDRESS					4.3 \$1	TREET	address							
COY-ST 7#					4.4 Cf		T-ZIP	<u> </u>						
THE				DELETE	5.1 Til	TLE							Change	Addition
NAME					5.2 NA	AME								
STREET ADDRESS					5.3 \$1	REET	address							
COM-ST ZIP					5.4 Cf	TY - \$1	T-ZIP							
HILE				DELETE.	6.1 11	TLE		l			•		Change	Addition
NAME					6.2 NA	AME.								
STREET ADORESS					6.3 ST	IREET	address							
CDY+S1+20F					6.4 CI	7Y - S1	T-ZIP							
14. I do heret	by certify that	the information supp	lied with this	filing does not qualif	ly for the	exe	mption s	tated in S	Section 119.07(3)(i), Florida	Statutes	. I further	certify that	the
l am ac o	ifficer or direct	or of the corporation	or the receiv	ntal annual report is to ver or trustee empow achment with an add	rered to e	execu execu	rate and ute this r	that my : report as	signature shall required by Ch	have the sa apter 607, F	me lega Iorida S	effect as tatutes; ar	if made un d that my	nder oath; that name