FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortnam Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 430646

(0)

1. Corporatio	CONSTRUCTION SERVIC	\ -,			irir riki rikil riki	fi sia hi sia hi f	<u> </u>
Principal Place of Business		Mailing Address	Mailing Address				
505 S. RIVERHILLS DRIVE TEMPLE TERRACE FL 33617 US		505 S RIVERHILLS DRIVE TEMPLE TERRACE FL 33617-7225 US					
•		03		3. Date Incorporated or Qualific	1	e of Last R	•
2. Principal Place of Business		2a, Mailing Address		07/16/1973 4. FEI Number	U4	4/19/199	Applied For
21		26		59-1467074	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #. etc. 27	F		×	\$8.75	Additional Required
City & State 23		City & State		Election Campaign Financing Trust Fund Contribution	9 🗆		O May Be d to Fees
Ζιρ 24	Country 25	Ζφ 29	Country 30				
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of Ne	w Registered	Agent	
5.41489			81 Name				
	Peter C JTH Riverhills drive		82 Street	Address (P.O. Box Number is Not Accep	otable)		
	TERRACE FL 33617		83				
I CITII CL	TEMPOETE GOOT						
			84 City		FL 85 Zip Code is statement for the purpose of changing its registered office		
	ith, and accept the obligations of. Sec Signature, by each profit if name of respectives again	nda. Such change was aumon. ction 607.0505, Florida Statute	Zed by the corporation's S Off Project Approach	s board of directors. Thereby accept the a	appointment as	s registered	i agent. I am
TITLE	PT	DELFTE	13. 1 1 THUE	ADDITIONS/CHANGES TO C		DIRECTO	PRS IN 12 Addition
NAME	BAKER, PETER C		1.2 NAME		L	Change	Xuoition 3
STREET ADDRESS	505 RIVERHILLS DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	TEMPLE TERRACE FL		1.4 C:TY - ST - Z:P			3	33617
TITLE	VS	DETEIE	2 1 T.TLE			Change	Addition
NAME Otors reposed	BAKER, VEDA JAN		2.2 NAME				
STREET ADDRESS	505 RIVERHILLS DRIVE		2 3 STREET ADDRESS				33617
CITY-ST-ZIP TITLE	TEMPLE TERRACE FL	☐ DELETE	2 4 C(TY - ST - ZIF 3 1 TIFLE				
NAMÉ			3 2 NAME		Ł	Change	☐ Add-tion
STREET ADDRESS			3.3 STHEET ADDRESS				
CITY-ST-ZIP			3.4 CITY - ST - 7IP				
TITLE		☐ DELFTE	4 1 TITLE		T	Change	Addition
NAME			4 2 NAME			_	
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			44 CITY-ST ZIP				
TITLE		DELETE	5 1 TITLE			Change	Addition
NAME			5 2 NAME				
STREET ADDRESS			5 3 STREET ADDRESS				
CITY-ST-ZIP		ED DOLLAR	5.4 CITY - ST - ZIP				
TITLE		☐ DELETE	6 1 TITLE		Ε	Change	☐ Addition
NAME STREET ADORESS			6.2 NAME				1
STREET ADDRESS			6.3 STREET ADDRESS				

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 12 if changed or on an attachment with an address.

WWW HAS INTEREST OF DIRECTOR

SIGNATURE:

(813) 989-2455

CR2E034 (12/95)