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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

(2)

HOYAL	. Construction enterf	PRISES, INC.					
Principal Plac	ce of Business	Mailing Address			{	EN BUBUN BABAN BABAN BABAN D	NIN II BIBIE ENNE
22090 ENSE	NADA WAY	22090 ENSENADA WAY					
BOCA RATON FL 33433 BOCA RATON FL 33433				DO NOT WOLL			
}						IN THIS SPACE	
					3. Date Incorporated or Qualified		
2 Principal R	Place of Business	2a. Mailing Address			02/21/1974 4. FEI Number		Applied For
21 26				59-1833118	<del></del>	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				, ,	60 70	5 Additional	
22 27					5. Certificate of Status Desired		Required
		City & State	e		6. Election Campaign Financing	\$5.0	0 May Be
23 28					Trust Fund Contribution	ebbA Adde	d to Fees
Zip	Country	Zip	Country		8. This corporation owes or has pa		
24	25	29	30		Personal Property Tax due June		□ No
	<ol> <li>Name and Address of Current ARRIS, MARY BERYL</li> </ol>	nt Registered Agent	81 Na		10. Name and Address of New Re	gistered Agent	
Į.	148						
22090 ENSENADA WAY			82 Str	eet Addres	ss (P.O. Box Number is Not Acceptat	ole)	
l BC	ICA RATON FL 33433		83				
1			84 Cit	У		FL 85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508. Florida Statute	es, the above-nar	ned corpor	ration submits this statement for the r		its registered
office or I	registered agent, or both, in the State	e of Florida. Such change was a	uthorized by the	corporation	ration submits this statement for the pin's board of directors. I hereby accept	ot the appointment a	as registered
i	an laninal with and accept the oblig	gations of, Section 507,0000, Fig	rida Statutes.				\
SIGNATURE	Signature, typed or printed name of registered ag	gent and title if applicable. (NOTI	: Registered Agent sign	ature required	when reinstating)	DATE	<del></del>
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTO	
TITLE	ST	DELETE	1.1 TITLE	ĺ		L Chạnge	e 🔲 Addition
NAME	HARRIS, MARY BERYL		1.2 NAME				
STREET ADDRESS	22090 ENSENADA WAY		1.3 STREET ADDRE	ess			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP				
TITLE	P	DELETE	2.1 TITLE			Change	e 🔲 Addition
NAME	HARRIS, RICHARD S.		2.2 NAME				
STREET ADDRESS	22090 ENSENADA WAY		2.3 STREET ADDRE	SS	1	<b>.</b> .	,
CITY-ST-ZIP	BOCA RATON FL	Laciere	2. 4 CITY - ST - ZIP	<u> </u>		- I Chang	a Balditian
TITLE		☐ DELETE	3.1 TITLE	1		Change	e Addition
NAME OTREET LODGESS			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRE	:55			
City-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE			☐ Change	e Addition
NAME		پستان	4.2 NAME			0angc	
STREET ADDRESS			4.3 STREET ADORE	nee l			\ \
CITY-ST-ZIP			4.4 CITY-ST-ZIP	~	•		
TITLE		DELETE	5.1 TITLE	+-		☐ Change	e Addition
NAME			5.2 NAME				_
STREET ADDRESS			5.3 STREET ADDRE	ss			1
CITY-SI-ZIP			5.4 CITY - ST - ZIP				ĺ
TITLE		DELETE	6.1 TITLE	_		☐ Change	e Addition
NAME			6.2 NAME	1			
CABELL YOUNGER			6 3 STREET ADDRE	·ee			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

1-14-98

**FILED** 

Jan 28 1998 8:00am

Secretary of State